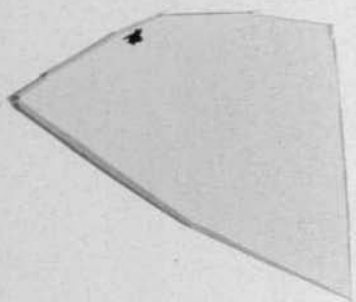


SUPERINTENDENT'S REPORT
OF THE
FLORIDA STATE HOSPITALS
CHATTAHOOCHEE, FLORIDA
and
ARCADIA, FLORIDA



For the period beginning
July 1, 1954, and ending June 30, 1956



GOVERNING BODY
BOARD OF COMMISSIONERS OF STATE
INSTITUTIONS

TALLAHASSEE, FLORIDA

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R. A. Gray..... *Secretary of State*

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W. D. Rogers, M.D..... *Superintendent*

Chattahoochee, Florida



TRANSMITTAL

To The
Board of Commissioners of State Institutions
Tallahassee, Florida
Gentlemen:

Transmitted herewith is report of the Florida State Hospital at Chattahoochee and the G. Pierce Wood Memorial Hospital at Arcadia, for the biennium July 1, 1954 to June 30, 1956, covering treatment program, statistical data, management and service departments for these institutions.

Appreciation is expressed to members of the Board and the Legislature for the fine cooperation rendered this hospital during the period of this report.

Respectfully submitted

W. D. ROGERS, M.D.
Superintendent

FLORIDA STATE HOSPITALS

This report covers operations of the Florida State Hospital, Chattahoochee, and the G. Pierce Wood Memorial Branch Hospital, Arcadia, for the two-year period ended June 30, 1956.

As a matter of interest, the hospital at Chattahoochee was established as a hospital for the care and treatment of the mentally ill in 1876. This was Florida's first and only hospital of this type until 1947, at which time a branch hospital at Arcadia was activated and received its first patients.

At the close of this biennium, June 30, 1956, the combined patient populations of these two hospitals totaled 8,069, reflecting a net population gain of 351 since beginning of the biennium. This increase is exceptionally low in comparison with previous experience and particularly so when we take into consideration the fact that admissions have increased by more than 20% during the past two years.

For purposes of general information and comparisons we have set forth in the first section of our report certain figures which reflect the operations of each hospital, as well as combination totals representing over-all operations of both hospitals. The second section of the report is devoted to functional and departmental activities at Chattahoochee and the third section to such activities at Arcadia.

AS OF JUNE 30, 1956, YOUR HOSPITALS SHOWED
THE FOLLOWING FIGURES

	Chattahoochee	Arcadia	Total
Land Acreage	6,928	2,173	9,101
Building and Structures	301	109	410
Patients Present	6,521	1,548	8,069
Prisoners	229	—	229
Employees	1,763	468	2,231

EXPENDED FOR MAINTENANCE:

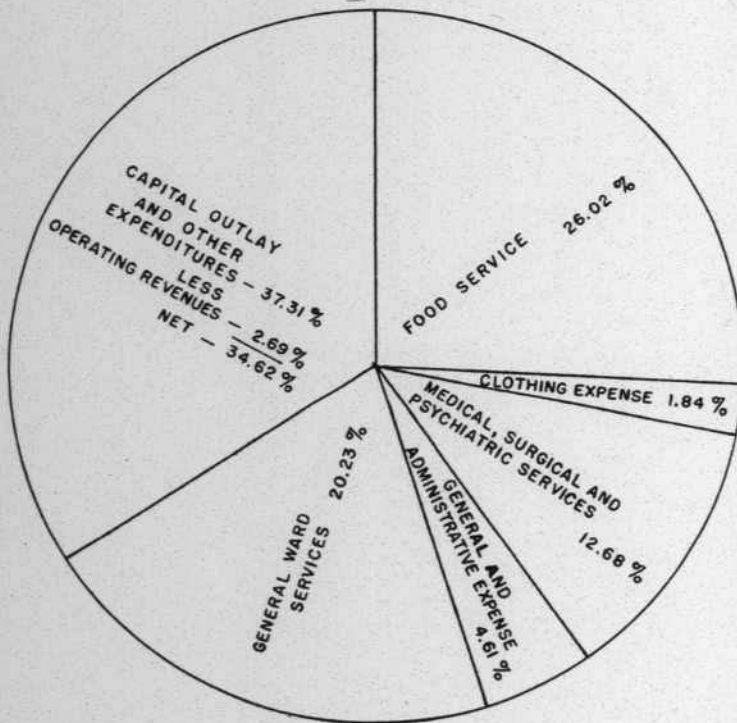
	Chattahoochee	Arcadia	Total
First Year of Biennium	\$ 5,487,924.56	\$ 1,293,401.22	\$ 6,781,325.78
Second Year of Biennium	5,730,332.15	1,414,871.32	7,145,203.47
TOTAL FOR BIENNIUM	\$11,218,256.71	\$ 2,708,272.54	\$13,926,529.25

PER PATIENT PER DAY COSTS:

	Chattahoochee	Arcadia	Total
First Year of Biennium	\$ 2.2631	\$ 2.8388	\$ 2.3542
Second Year of Biennium	2.3345	2.9121	2.4299
AVERAGE COST PER BIENNIUM	\$ 2.2990	\$ 2.8767	\$ 2.3925

NET EXPENDITURES — YEAR ENDED JUNE 30, 1955

Portion of Each Dollar Spent Went
For

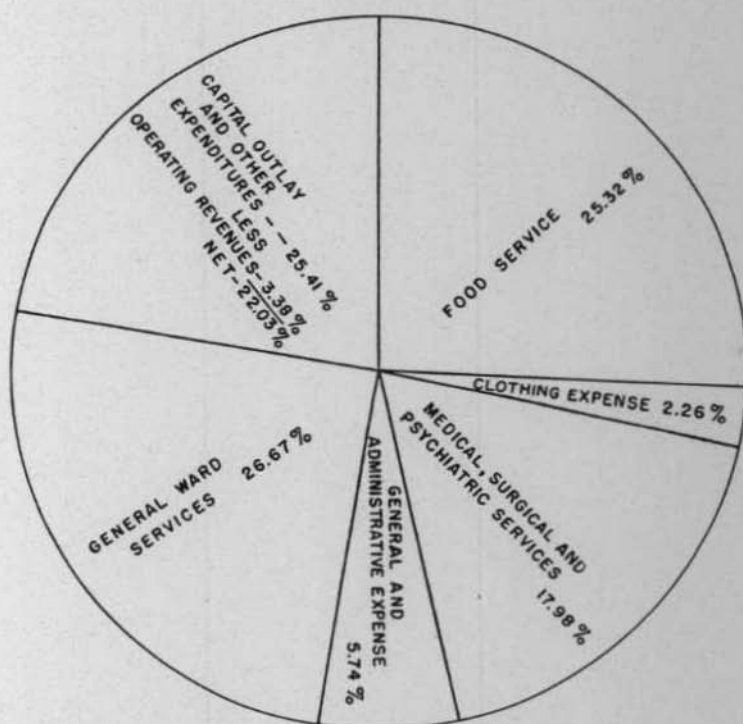


SOURCES EXPENDED FROM:

Operating Appropriations	\$ 7,210,683.38
Capital Outlay Appropriations	3,453,939.70
Funds	328,960.90
Donated Commodities	217,438.66
Total Expenditures	\$11,211,022.64
Less Fund Receipts	394,156.55
NET EXPENDITURES	<u>\$10,816,866.09</u>

NET EXPENDITURES — YEAR ENDED JUNE 30, 1956

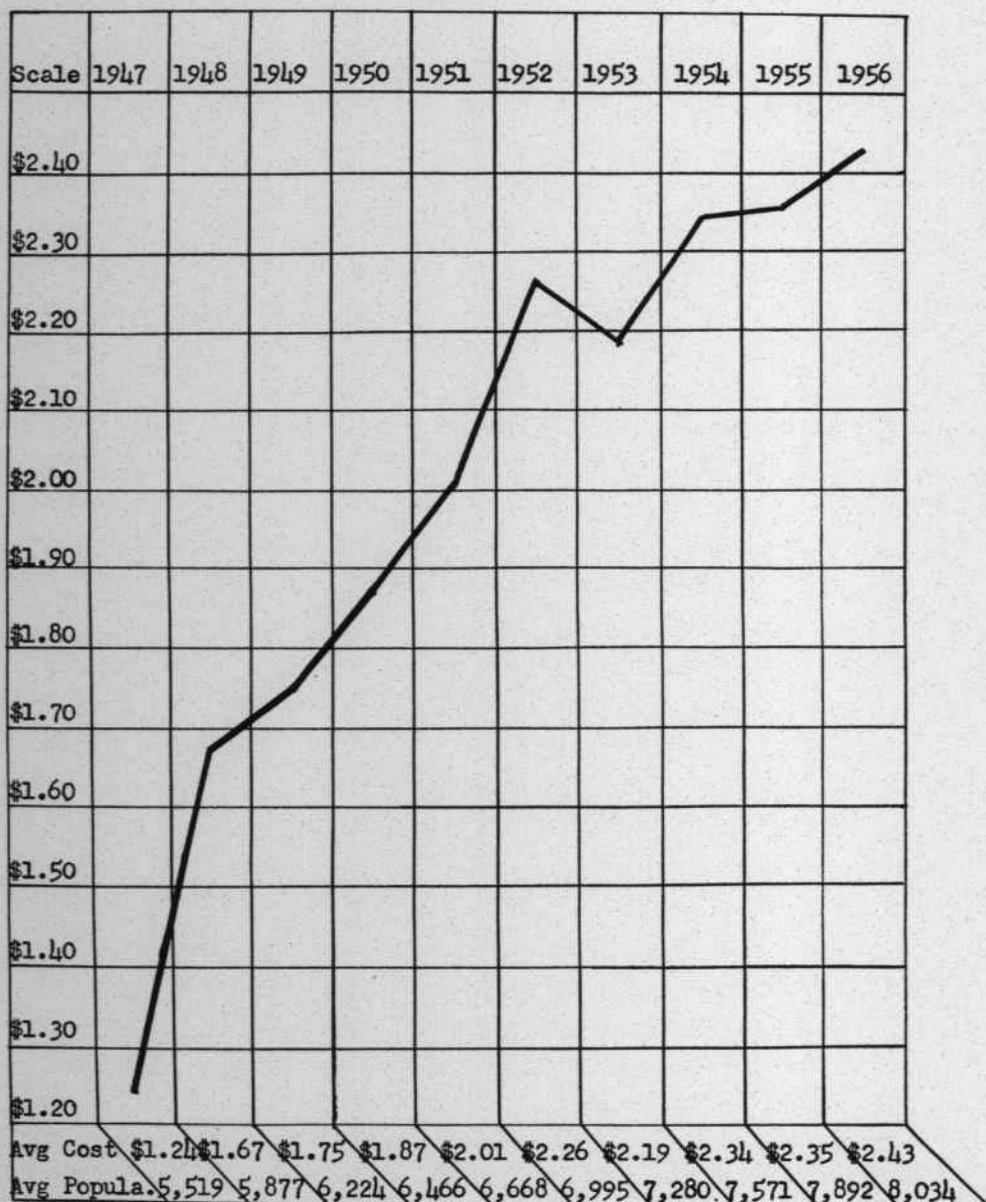
(Both Hospitals)

Portion of Each Dollar Spent Went
For

SOURCES EXPENDED FROM:

Operating Appropriations	\$ 7,417,245.65
Capital Outlay Appropriations	2,213,066.99
Funds	128,166.70
Donated Commodities	250,195.99
Total Expenditures	\$10,008,675.33
Less Fund Receipts	429,075.20
NET EXPENDITURES	\$ 9,579,600.13

GRAPHIC CHART SHOWING TOTAL CARE AND MAINTENANCE
COSTS, PER DIEM, PER PATIENT, FOR FISCAL YEARS SHOWN
(Both Hospitals)



STATEMENT OF CONDITION

FLORIDA STATE HOSPITALS

11

ASSETS	AT END OF FISCAL YEAR—JUNE 30, 1955			AT END OF FISCAL YEAR—JUNE 30, 1956		
	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>
CURRENT ASSETS AND DEFERRED CHARGES:						
Funds:						
Cash on Hand and Due from Comptroller.....	\$ 16,879.35	\$ 3,023.46	\$ 19,902.81	\$ 33,181.84	\$ 5,131.96	\$ 38,313.80
State Treasury.....	380,270.90		380,270.90	59,256.94	444.69	59,701.63
Accounts Receivable:						
Paying Patients.....	56,722.46	13,691.75	70,414.21	47,827.86	18,017.15	65,845.01
Others—Principally State Institutions.....	2,666.98	549.52	3,216.50	5,168.84	579.76	5,748.60
Inventories:						
Supplies.....	629,591.07	154,771.55	784,362.62	678,119.52	126,245.14	804,364.66
Beef Cattle and Hogs.....	18,485.00		18,485.00	21,965.00	12,500.00	34,465.00
Deposits on Containers, etc.....	1,240.72	210.00	1,450.72	1,516.72	136.00	1,652.72
Deferred Charges.....	2,706.68		2,706.68	2,460.85		2,460.85
TOTAL CURRENT ASSETS AND DEFERRED CHARGES.....	\$1,108,563.16	\$ 172,246.28	\$1,280,809.44	\$ 849,497.57	\$ 163,054.70	\$1,012,552.27
FIXED ASSETS:						
Land and Improvements.....	\$ 243,301.80	\$ 189,703.79	\$ 433,005.59	\$ 244,833.49	\$ 189,871.66	\$ 434,705.15
Buildings and Structures.....	8,467,706.62	1,832,415.08	10,300,121.70	11,131,252.60	3,059,263.34	14,190,515.94
Machinery and Equipment.....	3,100,085.52	559,983.62	3,660,069.14	3,970,904.82	879,107.44	4,850,012.26
Groves and Orchards.....	8,232.50		8,232.50	8,232.50		8,232.50
Horses and Mules.....	6,202.50		6,202.50	6,252.50		6,252.50
Dairy Herd.....	19,742.50		19,742.50	19,961.00		19,961.00
Uncompleted Projects—New Construction.....	\$2,234,271.07	\$ 811,378.83	\$3,045,649.90	\$ 269,803.57	681.00	270,484.57
TOTAL FIXED ASSETS.....	\$14,079,542.51	\$3,393,481.32	\$17,473,023.83	\$15,651,240.48	\$4,128,923.44	\$19,780,163.92
APPROPRIATIONS:						
For Current Operations.....	\$ 104,516.67	\$ 9,588.79	\$ 114,105.46	\$ 510,499.10	\$ 201,959.74	\$ 712,458.84
For Capital Outlays and Betterments.....	1,529,702.46	680,839.97	2,210,542.43	1,257,786.37	306,076.27	1,563,862.64
TOTAL APPROPRIATIONS.....	\$1,634,219.13	\$ 690,428.76	\$2,324,647.89	\$1,768,285.47	\$ 508,036.01	\$2,276,321.48
TOTAL ASSETS.....	\$16,822,324.80	\$4,256,156.36	\$21,078,481.16	\$18,269,023.52	\$4,800,014.15	\$23,069,037.67

STATEMENT OF CONDITION—Continued

LIABILITIES, RESERVES, AND INVESTMENTS	AT END OF FISCAL YEAR—JUNE 30, 1955			AT END OF FISCAL YEAR—JUNE 30, 1956		
	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>
CURRENT LIABILITIES:						
Accounts Payable.....	\$ 20,518.99	\$ 17,170.46	\$ 46,689.45	\$ 69,545.01	\$ 32,416.34	\$ 101,961.35
Prepaid Pay Patients Fees and Refunds Due.....	4,051.44	1,142.78	5,194.22	3,463.89	1,595.05	5,058.94
Reserve for General Revenue Transmittals.....	65,067.31	16,121.95	81,189.26	68,769.28	22,728.87	91,498.15
TOTAL CURRENT LIABILITIES.....	\$ 98,637.74	\$ 34,435.19	\$ 133,072.93	\$ 141,778.18	\$ 56,740.26	\$ 198,518.44
UNEXPENDED FUNDS AND APPRO- PRIATIONS:						
Cash on Hand for Transfer to Trust Funds.....	6,153.75		6,153.75	4,453.17		4,453.17
Revolving Fund.....				10,000.00	1,000.00	11,000.00
Cash with State Treasurer:						
For Current Operations.....	62,474.68		62,474.68	21.51		21.51
For Capital Outlay and Better- ments.....	317,796.22		317,796.22	59,235.43	444.69	59,680.12
Appropriations:						
Operating.....	104,516.67	9,588.79	114,105.46	510,499.10	201,959.74	712,458.84
Capital Outlay.....	1,529,702.46	680,839.97	2,210,542.43	1,257,786.37	306,076.27	1,563,862.64
TOTAL UNEXPENDED FUNDS AND APPROPRIATIONS.....	2,020,643.78	\$ 690,428.76	\$2,711,072.54	\$1,841,995.58	\$ 509,480.70	\$2,351,476.28
INVENTORIES AND OTHER BALANCES...	\$ 623,500.77	\$ 137,811.09	\$ 761,311.86	\$ 634,009.28	\$ 104,869.75	\$ 738,879.03
PLANT INVESTMENT.....	\$14,079,542.51	\$3,393,481.32	\$17,473,023.83	\$15,651,240.48	\$4,128,923.44	\$19,780,163.92
TOTAL LIABILITIES, RESERVES, AND INVESTMENTS.....	\$16,822,324.80	\$4,256,156.36	\$21,078,481.16	\$18,269,023.52	\$4,800,014.15	\$23,069,037.67

SUMMARY OF OPERATIONS

	FISCAL YEAR JULY 1, 1954, THROUGH JUNE 30, 1955			FISCAL YEAR JULY 1, 1955, THROUGH JUNE 30, 1956		
	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>
BALANCES BROUGHT FORWARD:						
Cash and Bank.....	\$ 27,824.89	\$ 2,203.76	\$ 30,028.65	\$ 16,879.35	\$ 3,023.46	\$ 19,902.81
State Treasurer.....	645,730.01		645,730.01	380,270.90		380,270.90
Appropriations, Operating.....	788,045.07	184,435.64	972,480.71	104,516.67	9,588.79	114,105.46
Appropriations, Capital Outlay.....	4,342,799.33	1,643,445.33	5,986,244.66	1,529,702.46	680,839.97	2,210,542.43
TOTAL BALANCES BROUGHT FORWARD	\$5,804,399.30	\$1,830,084.73	\$7,634,484.03	\$2,031,369.38	\$ 693,452.22	\$2,724,821.60
APPROPRIATIONS, DONATIONS, AND REVENUES:						
Appropriations:						
Operating.....	\$6,431,260.09	\$1,439,244.91	\$7,870,505.00	\$6,396,330.00	\$1,679,381.00	\$8,075,711.00
Capital Outlay and Betterments.....				1,223,200.00	295,000.00	1,518,200.00
Other.....	4,417.01	744.05	5,161.06	4,405.40	772.35	5,177.75
Donations:						
Donated Government Commod- ities.....	210,620.82	6,817.84	217,438.66	233,991.16	16,204.83	250,195.99
Auxiliary Funds.....	14,857.86	3,159.24	18,017.10	10,702.70	1,776.93	12,479.63
Operating Revenues:						
Pay Patients Income.....	186,675.12	55,250.46	241,925.58	212,702.87	66,426.44	279,129.31
Profit on Hog Farm.....	38,759.79		38,759.79	21,194.02		21,194.02
Other Income.....	10,199.60	87.83	10,287.43	24,004.50	89.97	24,094.47
Supplies and Equipment Transfers.....	14,531.19	14,531.19		19,347.75	19,347.75	
TOTAL APPROPRIATIONS, DONATIONS, AND REVENUES.....	\$6,882,259.10	\$1,519,835.52	\$8,402,094.62	\$8,107,182.90	\$2,078,999.27	\$10,186,182.17
TOTAL AVAILABLE.....	\$12,686,658.40	\$3,349,920.25	\$16,036,578.65	\$10,138,552.28	\$2,772,451.49	\$12,911,003.77

SUMMARY OF OPERATIONS—Continued

	FISCAL YEAR JULY 1, 1954, THROUGH JUNE 30, 1955			FISCAL YEAR JULY 1, 1955 THROUGH JUNE 30, 1956		
	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals Combined</i>
EXPENDITURES AND DEDUCTIONS:						
Maintenance of Patients:						
Food Service	\$2,310,252.52	\$ 503,885.17	\$2,814,137.69	\$1,993,347.76	\$ 432,236.86	\$2,425,584.62
Clothing	167,386.90	31,758.80	199,145.70	167,317.69	48,746.58	216,064.27
Medical, Surgical, and Psychi- atric Care	1,185,433.57	186,643.12	1,372,076.69	1,471,337.57	251,429.51	1,722,767.08
Administrative and General Expense	361,198.89	136,925.34	498,124.23	395,907.54	153,948.53	549,856.07
General Ward Services	1,699,287.19	489,527.08	2,188,814.27	1,960,322.98	595,026.25	2,555,349.23
TOTAL MAINTENANCE EXPENSE	\$5,723,559.07	\$1,348,739.51	\$7,072,298.58	\$5,988,233.54	\$1,481,387.73	\$7,469,621.27
Capital Outlay	2,994,774.71	1,006,942.60	4,001,717.31	1,706,090.02	735,442.12	2,441,532.14
Increment—Inventories and Other Assets	9,689.60	43,512.60	33,823.00	20,300.96	27,436.44	7,135.48
NON-OPERATING DEDUCTIONS:						
Transfers to General Revenue	\$ 272,594.43	\$ 54,613.97	\$ 327,208.40	\$ 560,391.85	\$ 66,154.56	\$ 626,546.41
Appropriations Reverting	1,674,050.41	202,659.35	1,876,709.76	2,811.66	3,290.86	6,102.52
TOTAL NON-OPERATING DEDUCTIONS	\$1,946,644.84	\$ 257,273.32	\$2,203,918.16	\$ 563,203.51	\$ 69,445.42	\$ 632,648.93
TOTAL EXPENDITURES AND DEDUC- TIONS	\$10,655,289.02	\$2,656,468.03	\$13,311,757.05	\$8,277,828.03	\$2,258,838.83	\$10,536,666.86
BALANCES FORWARDED	\$2,031,369.38	\$ 693,452.22	\$2,724,821.60	\$1,860,724.25	\$ 513,612.66	\$2,374,336.91

PERCENTAGE OF MAINTENANCE EXPENSE, CAPITAL OUTLAY, AND
OTHER EXPENDITURES TO NET EXPENDITURES

COMBINED TOTALS—BOTH HOSPITALS	Fiscal Year—July 1, 1954 Through June 30, 1955		Fiscal Year—July 1, 1955 Through June 30, 1956	
	Net Amount	Per Cent	Net Amount	Per Cent
Maintenance Expenses:				
Food Service.....	\$ 2,814,137.69	26.02	\$ 2,425,584.62	25.32
Clothing.....	199,145.70	1.84	216,064.27	2.26
Medical, Surgical, and Psychiatric Care.....	1,372,076.69	12.68	1,722,767.08	17.98
Administrative and General Expense.....	498,124.23	4.61	549,856.07	5.74
General Ward Service.....	2,188,814.27	20.23	2,555,349.23	26.67
TOTAL MAINTENANCE EXPENSES.....	\$ 7,072,298.58	65.38	\$ 7,469,621.27	77.97
Deduct Operating Revenues.....	290,972.80	2.69	324,417.80	3.38
NET MAINTENANCE EXPENSES.....	\$ 6,781,325.78	62.69	\$ 7,145,203.47	74.59
Capital Outlay.....	4,001,717.31	37.00	2,441,532.14	25.49
Increment—Inventories and Other Current Resources.....	33,823.00	.31	7,135.48	.08
NET EXPENDITURES.....	\$10,816,866.09	100.00	\$ 9,579,600.13	100.00
Expended from:				
Appropriations.....	\$10,664,623.08		\$ 9,630,312.64	
Funds.....	328,960.90		128,166.70	
Donated Commodities.....	217,438.66		250,195.99	
	\$11,211,022.64		\$10,008,675.33	
Less Fund Receipts.....	394,156.55		429,075.20	
TOTALS.....	\$10,816,866.09		\$ 9,579,600.13	

COMPARATIVE MAINTENANCE STATEMENT FOR FISCAL YEARS SHOWN

TYPE OF EXPENSE	Year Ended June 30, 1955		Year Ended June 30, 1956	
	Total Costs	Per Diem	Total Costs	Per Diem
FLORIDA STATE HOSPITAL—CHATTAHOOCHEE:				
Food Service.....	\$ 2,310,252.52	\$.9527	\$ 1,993,347.76	\$.8121
Clothing Expense.....	167,386.90	.0690	167,317.69	.0682
Medical, Surgical, and Psychiatric Services.....	1,185,433.57	.4889	1,471,337.57	.5994
General and Administrative Expense.....	361,198.89	.1489	395,907.54	.1612
General Wards Service.....	1,699,287.19	.7008	1,960,322.98	.7986
TOTALS.....	\$ 5,723,559.07	\$ 2.3603	\$ 5,988,233.54	\$ 2.4395
Deduct Operating Revenues.....	235,634.51	.0972	257,901.39	.1050
NET COSTS.....	\$ 5,487,924.56	\$ 2.2631	\$ 5,730,332.15	\$ 2.3345
Average Number of Patients.....		6,644		6,707
FLORIDA STATE HOSPITAL—ARCADIA:				
Food Service.....	\$ 503,885.17	\$ 1.1059	\$ 432,236.86	\$.8896
Clothing Expense.....	31,758.80	.0697	48,746.58	.1003
Medical, Surgical, and Psychiatric Services.....	186,643.12	.4097	251,429.51	.5175
General and Administrative Expense.....	136,925.34	.3006	153,948.53	.3169
General Wards Services.....	489,527.08	1.0744	595,026.25	1.2247
TOTALS.....	\$ 1,348,739.51	\$ 2.9603	\$ 1,481,387.73	\$ 3.0490
Deduct Operating Revenues.....	55,338.29	.1215	66,516.41	.1369
NET COSTS.....	\$ 1,293,401.22	\$ 2.8388	\$ 1,414,871.32	\$ 2.9121
Average Number of Patients.....		1,248		1,327
BOTH HOSPITALS—COMBINED:				
Food Service.....	\$ 2,814,137.69	\$.9770	\$ 2,425,584.62	\$.8249
Clothing Expense.....	199,145.70	.0691	216,064.27	.0735
Medical, Surgical, and Psychiatric Services.....	1,372,076.69	.4763	1,722,767.08	.5858
General and Administrative Expense.....	498,124.23	.1729	549,856.07	.1870
General Wards Services.....	2,188,814.27	.7599	2,555,349.23	.8690
TOTALS.....	\$ 7,072,298.58	\$ 2.4552	\$ 7,469,621.27	\$ 2.5402
Deduct Operating Revenues.....	290,972.80	.1010	324,417.80	.1103
NET COSTS—COMBINED.....	\$ 6,781,325.78	\$ 2.3542	\$ 7,145,203.47	\$ 2.4299
Average Number of Patients—Combined.....		7,892		8,034

SUMMARIZED DISTRIBUTION OF PAYROLLS

	<i>Chattahoochee</i>	<i>Arcadia</i>	<i>Both Hospitals</i>
YEAR ENDED JUNE 30, 1955:			
Food Service.....	\$ 289,347.14	\$ 85,248.19	\$ 374,595.33
Medical, Surgical, and Psychi- atric Service.....	863,144.44	117,678.67	980,823.11
General and Administrative Service.....	211,744.95	64,390.46	276,135.41
General Wards Service.....	1,192,679.30	362,613.78	1,555,293.08
Productive and Maintenance Departments.....	513,418.60	114,510.30	627,928.90
	\$ 3,070,334.43	\$ 744,441.40	\$ 3,814,775.83
YEAR ENDED JUNE 30, 1956:			
Food Service.....	\$ 318,397.24	\$ 90,473.88	\$ 408,871.12
Medical, Surgical, and Psychi- atric Service.....	984,891.40	149,493.21	1,134,384.61
General and Administrative Service.....	207,473.32	71,269.77	278,743.09
General Wards Service.....	1,292,015.39	403,584.37	1,695,599.76
Productive and Maintenance Departments.....	503,360.75	118,186.35	621,547.10
	\$ 3,306,138.10	\$ 833,007.58	\$ 4,139,145.68



THE PARK TRAMMELL BUILDING
For the care and treatment of aged patients

FLORIDA STATE HOSPITAL**CHATTAHOOCHEE**

A general idea of the scope of the hospital at Chattahoochee may be gained from the following summary of departments and divisions which function to provide the multiple services essential to operations and maintenances of this large hospital, where 6,521 patients are receiving care and treatment as of June 30, 1956:

Administration
Accounting & Trust
Receiving & Intensive Treatment Services
Medical & Surgical Services
Continued Treatment Services
Dental Services
School of Nursing Education
School of Medical Technology
Occupational Therapy
Recreational Therapy
Chaplaincy
Canteen
Barber & Beauty Shops
Food Services—6
Library
Post Office
Fire Department
Sanitary Department
General Stores
Departmental Stores
Ice Plant

Horticulture & Ground Maintenance
Steam Plant
Electric Plant
Water Plant
Telephone System
Telegraph Service
Radio & Refrigeration Service
Plumbing & Electric Services
Machine Shop
Garage
Construction Department
Carpenter Shop
Mop & Broom Factory
Saw Mill
Shoe Repair Shop
Mattress Factory
Sewing Room
Farm, Dairy, Piggery
Canning Plant
Feed & Grist Mill
Laundry

FLORIDA STATE HOSPITAL – CHATTAHOOCHEE

DEPARTMENT HEADS

As of June 30, 1956

W. D. Rogers, M.D.	Superintendent
J. T. Benbow, M.D.	Clinical Director
J. B. O'Connor, M.D.	Assistant Clinical Director
J. K. Cox, D.D.S.	Chief Dentist
F. D. Palsgraaf	Administrative Assistant
D. D. Miles	Cashier
Dora F. Dean, R.N.	Supervisor of Nurses
Louise Mathews, R.N.	Director, School of Nursing Education
Leslie Shepherd	Chaplain
Isabel Mawhinney	Secretary to the Superintendent
R. T. Duncan	Chief Engineer
G. B. Kirkland	Supervisor of Laundry
Mary C. Harvard, O.T.R.	Occupational Therapist
E. J. Langley	Fire Chief
Jules Terhell	Horticulturist
Mary Alice Pond	Dietitian
Mae T. Clark, R.N.	Supervisor of Amos Infirmary
Elizabeth Bradley, R.N.	Supervisor of Park Trammell Building
Dan W. D'Alemberte	Supply Clerk
Arthur L. Patman	Manager of Commissary
F. D. Bailey	Supervisor of White Men's Department
Jessie Domin, R.N.	Supervisor of White Women's Department
H. M. Dean	Supervisor of Colored Men's Department
Chleo Sanders	Supervisor of Colored Women's Department
Angus H. Franklin	Supervisor of Farm
Norman S. James	Sanitary Supervisor
Charles P. Evans	Chief Steward
Colie Nichols	Captain of the Guard
Jewel Patman, R.N.	Matron, Landis Hall
Andrew Moore	Construction Supervisor
Alva T. Revell	Director of Recreation
Marvin Hill	Steward, Amos Infirmary Kitchen
Iris Jones	Librarian

FLORIDA STATE HOSPITAL — CHATTAHOOCHEE

MEDICAL DEPARTMENT

STAFF

W. D. Rogers, M.D.	Superintendent
J. T. Benbow, M.D.	Clinical Director
J. B. O'Connor, M.D.	Assistant Clinical Director
M. C. Sexton, M.D.	Psychiatrist
Henry Schwartz, M.D.**	Assistant Physician (Tuberculosis)
C. H. Denser, M.D.	Psychiatrist
H. H. Ring, M.D.	Assistant Physician
R. S. Gutsell, M.D.	Assistant Physician
R. Mosteller, M.D.	Pathologist
John Gumanis, M.D.	Psychiatrist
Samuel M. Solomon, M.D.	Psychiatrist
Anne M. Vogt, M.D.**	Assistant Physician
I. T. Clark, M.D.	Psychiatrist
E. L. Leonard, M.D.**	Psychiatrist
J. F. Day, M.D.**	Assistant Physician
A. W. Brown, M.D.**	Radiologist
G. A. Duff, M.D.	Assistant Physician
John T. Daves, M.D.	Assistant Physician
W. S. Burton, M.D.**	Assistant Physician (Tuberculosis)
L. D. Campbell, M.D.	Psychiatrist
C. H. Cronick, M.D.	Psychiatrist
R. C. Eaton, M.D.	Psychiatrist
E. N. Pleasants, M.D.	Psychiatrist
E. C. Love, Jr., M.D.	Radiologist
Victor S. Allen, M.D.	Psychiatrist
F. D. Neves, M.D.	Assistant Physician (Tuberculosis)
C. C. Thomas, M.D.	Surgeon
J. K. Cox, D.D.S.	Chief Dentist
Rosselle L. McCaleb, D.D.S.**	Assistant Dentist
Richard L. Putman, D.D.S.**	Assistant Dentist
James E. Hendricks, D.D.S.**	Assistant Dentist
Kevin B. Pasley, D.D.S.**	Assistant Dentist
Jack V. Frost, D.D.S.**	Assistant Dentist
Levonne R. Carter, D.D.S.	Assistant Dentist
George R. Kimbrell, D.D.S.	Assistant Dentist
Nicholas A. Esterhay, D.D.S.	Assistant Dentist
Raymond A. Hansen, D.D.S.	Assistant Dentist
William D. McClintock, D.D.S.	Assistant Dentist
Donald E. Fricke, D.D.S.**	Assistant Dentist

Julian C. Davis	Psychologist
Sam Cunningham	Psychologist
Leroy Kletti**	Psychologist
Forrest C. Orr**	Psychologist
Horace F. Stewart, Jr.	Psychologist
C. M. Mayhall	Pharmacist
Wm. J. Hite, Jr.	Medical Technologist
Pricilla Burdick**	Medical Technologist
Ann Segrest**	Medical Technologist
Vernon Culverhouse**	Medical Technologist
Helga Elliott**	Medical Technologist
Richard Fritz	Medical Technologist
Marian King**	Medical Technologist
Juanita C. Lytton**	Medical Technologist
Stanley Econom	Medical Technologist
Jeff E. Fulks	Medical Technologist
Bennie Joe Dudley	Medical Technologist
Virginia Williamson	Chief Psychiatric Social Worker
Marian Nassau	Psychiatric Social Worker
Martha Watkins	Social Worker
Mae Pickens**	Social Worker
Geraldine McAlpin	X-Ray Technician
Helen Smith**	X-Ray Technician
Mary B. Smith	X-Ray Technician
Roberta Reid	X-Ray Technician
Dora F. Dean, R.N.	Supervisor of Nurses
Audrey Hudgens, R.N.	Assistant Supervisor of Nurses
Etelka Young, R.N.**	Director, School of Nursing
Louise Mathews, R.N.	Director, School of Nursing
Mary C. Harvard	Director, Occupational Therapy

VISITING STAFF

J. G. Lyerly, M.D.	Neurosurgeon
William J. Hutchison, M.D.	Orthopedist
Harold W. Ward, M.D.	Ophthalmologist
Nelson H. Kraeft, M. D.	Chest Surgeon
Robert N. Webster, M.D.	Urologist

** Resigned

FLORIDA STATE HOSPITAL — CHATTAHOOCHEE

MOVEMENT OF POPULATION

During the biennium we admitted 4,231 patients and this included admissions in every category whether first admissions, returns from furlough, transfers from other states or institutions, and admissions by the Criminal Courts and Circuit Courts of the State. Of this number 2,079 were admitted during the first half of the biennium and 2,152 during the second half of the biennium. This is an increase over the previous biennium, at which time 3,524 patients were admitted during the two-year period, and we showed a gain in admissions of 707 patients in this biennium over the previous like period.

Separations from the hospital showed a total of 4,200 separations during this period and this included patients who were released on furlough, discharged as competent, died, escaped, transferred to other facilities such as Veterans Hospitals and other state institutions, and transferred to Arcadia. In breaking this figure down we find that 1,844 separations occurred during the first year and 2,356 during the second year of the biennial period. Of the 1,844 who were separated, 1,119, were furloughed, 91 discharged as competent, 445 passed away, and 57 escaped. The remainder were transferred to other institutions either in or out of the state. Sixty of this number were transferred to the branch hospital at Arcadia. In the second period, 1955-56, 1,280 were furloughed, 230 discharged as competent, 452 died in the institution, 26 escaped, 263 were transferred to Arcadia, and the remainder were transferred, as previously, to other facilities.

In looking at the above figures it is quite noticeable that during the last half of the biennium the discharges from the institution by virtue of competency were greatly increased, there being 230 in the last half as compared to 91 in the first part of the biennium. This is due to the increased availability of staff members for conferences and for active treatment programs to bring our patients to the level where they may be released in this manner.

In the past two-year period we have opened three new facilities. The tubercular wing of about 100 beds which was under construction during the previous biennium was completed and opened, and the geriatric facility of slightly under 600 beds was completed and is being used at the present time. Both of these facilities were greatly needed, and we have been able to concentrate our active tubercular program in one area rather than having it scattered as it previously was. The geriatric facility has been a life saver in many respects, and has afforded very excellent treatment facilities for geriatric patients. We have received many very favorable comments upon the building, both from persons in the state and

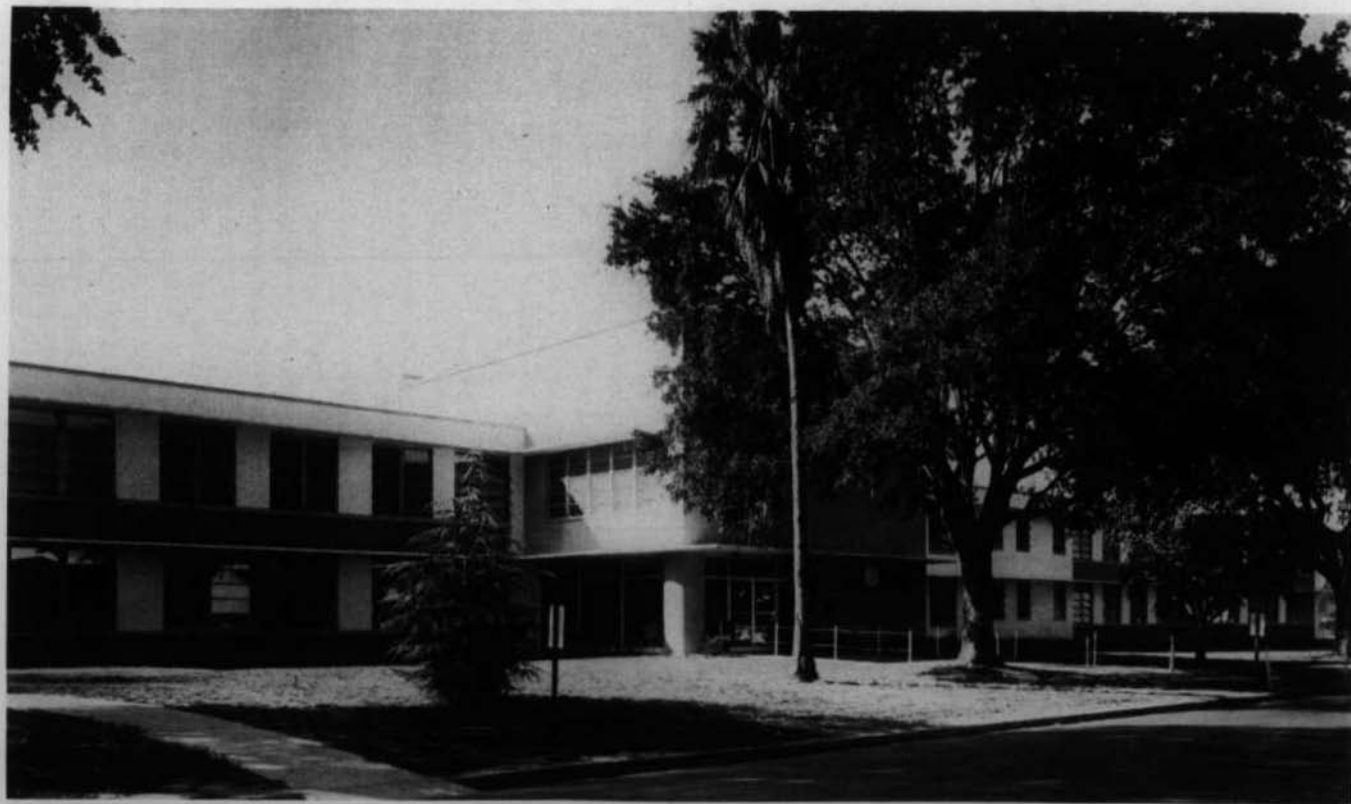
from visiting psychiatrists and lay people who have come from various parts of the country. We are quite proud of the geriatric unit, and feel that it is a very advanced sort of unit which will greatly enhance our program here at the Florida State Hospital. The third facility which has been opened is that of the new white women's receiving unit of 222 beds, and which is occupied and operating at the present time. The Social Service Department is incorporated in this unit, and it is a very highly functional building which will provide for a large active treatment area for our white women new admissions.

A new medical and surgical facility for colored patients is being planned, and we hope that by the end of the next biennium it will be completed and be ready for occupancy. In connection with this, a new laboratory is also included, and is an addition which is extremely necessary to carry out the many varied and extensive diagnostic procedures which are performed in the laboratory. The replacement of some of our continued treatment or chronic ward sections is of prime importance as we still have many areas in the institution which are badly overcrowded and need to be replaced by buildings which will be conducive to rehabilitation rather than conducive to stagnation and regression on the part of our patient population.

In the classification of admission diagnoses we find that schizophrenia is still our largest diagnostic classification and is followed by the mental disorders which are due to changes of age. The problem of the aged is still a very definite problem with us, but we feel that advances have been made in the caring for these patients, and total-push programs, while not in general use with this type of patient, are under consideration and will be more widely used during the next biennial period. Occupational therapy with the aged is a valuable sort of treatment, and in combination with drug therapy is showing favorable results.

The death rate for the biennium was 51.5 per thousand patients. The first half of the biennium showed 52.0 rate and the second half showed 51.0. This is up somewhat from the previous biennial period, but we feel that this again is due to the fact that our total census of the aged patients is increasing and that we have also had an increase in the number of patients treated during the biennial period.

We have had quite good cooperation with the Veterans Facility through the State Service Officers and the Veterans Regional Offices and have been able to transfer 77 patients to Veterans Facilities during the two-year period. Service connected cases are taken quite quickly by the Veterans Administration if there are no criminal charges pending against the patient. However, the Veterans Administration will not take a patient who has any criminal charges pending against him, and oft-times it is difficult or impossible to dispose of the charges so that such patient may be transferred to a veterans hospital. Non-service connected



THE NEW WOMEN'S RECEIVING AND INTENSIVE
TREATMENT BUILDING

patients are taken very slowly by the Veterans Administration because of the crowding in veterans hospitals, and many times there is a delay of many months between application and authorization for patients who are not service connected. All veterans who are admitted to the institution are routinely processed with the Regional Office and application is submitted to that office for transfer of the patient to a veterans hospital.

PROCEDURES RELATING TO THE ADMISSION AND RELEASE OF PATIENTS

Patients are accepted for admission at this institution following commitment by the courts, or in rare instances by voluntary application. After the individual is committed by the court, application is filed in the office of the Superintendent for admission, and the admission is authorized as soon as a facility is available to receive the patient. Patients are delivered to the institution by officers, friends, or relatives if possible, and if delivery is not possible by local persons, the patient is picked up by the hospital bus and brought to the institution.

A greater percentage of our patients are committed by the County Court, but we have a certain number who are committed directly by Circuit Court, Criminal Courts of Record, and a few patients who are transferred from other institutions to us either for examination and treatment or following commitment by the local County Court in which the institution is situate.

Voluntary admission has been authorized by legislative act since July of 1955. We have had in the last half of the biennium 9 voluntary admissions. These individuals are contacted following written application to the Superintendent or Clinical Director and an appointment is made, interview is held, and if in the opinion of the Superintendent or Clinical Director admission is deemed advisable, and a bed is available, the patient may be admitted as a voluntary patient. It has been our feeling, however, that since we have a fairly good size waiting list at all times, we should take patients who are on this waiting list wherever possible rather than take voluntary admissions. Voluntary admissions, as we have had them so far, have not been too satisfactory because of the ability of the patient to leave the hospital on demand. We can, by law, go into court and have such an individual committed in our local court, but this, we feel, destroys the patient-physician relationship which is so important in psychiatric management of these cases, and if commitment is necessary we feel the commitment should be taken care of, or carried out, by the County Judge of the county of residence of the individual patient.

Following reception of an individual at the Florida State Hospital, medical and psychiatric studies are begun. These include physical examinations, including X-ray examination, laboratory tests, and any technical measure deemed necessary. Psychological investigation is carried

out where requested by the attending psychiatrist: Social service investigation is done on every patient following admission, and if the patient is not accompanied by relatives who can give the social worker information at the time of his reception, routine questionnaires are mailed out for the gathering of pertinent information. Exhaustive psychiatric studies are begun after a very short while, and these usually take some period of time to complete, depending upon the individual patient in question. Ward staff conferences are held at frequent intervals for the consideration of diagnostic problems and the outlining of treatment for patients on the individual services. The institution of treatment, however, does not necessarily wait until the final completion of the gathering of the pertinent data and factual information as oftentimes it takes many weeks, and even months, to assemble data, especially when it must be obtained from other governmental agencies or some of the Veterans Bureau hospitals which are located at distant points and records have been scattered.

The release of patients is accomplished in two methods, either by furlough to responsible relatives or guardians, or if no such persons are available, to friends or to a home placement situation after an investigation by our Social Service Department. Patients released in this manner are those who have shown improvement which we feel warrants their returning to society to test their ability to readjust in a social group outside of an institution. We may, or may not, feel these patients are completely well, but we do feel these patients do need a period of readjustment before being declared entirely competent. It is often felt by the psychiatric staff that many of these patients need varying amounts of supervision, especially those who have some of the more severe mental disorders, or individuals who have been confined in the institution for protracted periods of time and whose contact with society has been meager, and who have led a very protected and regimented sort of life in an institution. Many times it is quite difficult for such patients to readjust to social living in a fast moving world without a helping hand, and we feel that it is unfair to the individual patient to make them try and go through this period of adjustment without some aid. Therefore, the furlough, or parole, is used most frequently for many of our patients. These individuals may return without any further court procedure, or papers to the institution, any time within a period of a year if restoration proceedings have not been carried out. If they show symptoms of recurrences of mental illness, the family, or the person to whom they are furloughed, may bring them back without notice or legal procedure of any kind. If they remain out for a period of a year, the individual patient is automatically discharged and a certificate is mailed to the person to whom they were released. This certificate is merely a statement that the patient has been out of the institution for a period of a year, and does not certify as to his or her competency.

Competency discharge is the other means of release, and while in the past was quite an uncommon one, it is becoming more frequently used at the present time. This is because of our better methods of treatment, and also because of the greater number of psychiatric staff that we have had, especially in the last half of the biennium. Many patients who have mental disorders of a moderately severe or mild type, and make rapid recoveries, do quite well upon being discharged as competent. This is especially true in the case of an individual who is a wage earner and the main support financially of a family group, and upon release from the hospital must go back to a productive sort of life in order to care for and provide for his family group. The loss of one's civil rights entails the loss of such things as driver's license and many of our patients, especially the wage earners, who are released, go to jobs requiring such licenses. If the staff feels that this patient is adequately recovered from his emotional disorder to be able to conduct himself in a socially acceptable manner, and to be able to realize the responsibilities which are placed upon him, we will seriously consider him for a competency discharge.

Discharge from the institution as competent, however, does not restore the individual's legal rights. This can only be restored by the court. The last legislature has made provision so that the committing court can restore the individual. Previously patients committed by the County Court had to be restored by the Circuit Court, but by an act of the last legislature they may be restored at the present time by the County Court, which is less expensive and much more rapid means because of the crowded dockets of many of the Circuit Courts.

MEDICAL STAFF ACTIVITY

During the biennium we had 27 physicians employed on a fulltime capacity and 5 physicians on a part time capacity. At the end of the biennium we had 21 physicians on the staff of the hospital. It is our feeling that this is an inadequate number of members of the staff because we have seen that with the increase in the staff, especially in the last half of the biennium, there has been a great surge of activity in the fields of therapy and also in general medical and surgical care of our patients and this has all been to the benefit of our patient population. It is felt that a request for additional medical personnel should be made at the next legislature so as to expand our services even greater than they have been in the past.

The demand for psychiatric personnel has increased throughout the whole United States as result of increasing awareness of the importance of adequate treatment for emotional illness and the gravity of the problem of mental illness throughout the nation as a whole. We have of necessity had to compete with other institutions in this section of the country for personnel and so far have been able to keep a very good staff at all times, though, as stated before, we feel that the number we have is inadequate to

do the job which we would like to perform, and in order to make further progress it will be necessary to increase the staff at regular intervals.

We have been fortunate in being able to add supporting personnel in other disciplines in the field of mental illness, especially in the field of psychiatric social work. We have had an affiliation for the past two years with Florida State University School of Social Work and have served as Field Placement Center for social work students in psychiatric social work area. At the end of the biennium we had three full-time workers in the department, and a fourth person is being added shortly after the close of the biennium. These individuals have been a tremendous help in not only the obtaining of data concerning a person's behavior and activity prior to hospitalization, but also in the matter of placement of patients in foster homes and in areas that would be suitable for their rehabilitation after leaving the hospital. The social workers have also been rather active in the day to day readjustment program of our patient population, especially in the acute treatment areas.

We have been fortunate in the last biennium to have the assistance of specialists in such fields as chest surgery, urology, orthopedics, ophthalmology and neurosurgery and these men give service on a part-time basis to the institution. We have specialists in pathology, surgery and radiology at the institution on a full-time basis for our medical and surgical services.

Diagnostic Conferences are held at regular intervals on selected cases for discussion of diagnostic problems, outlining of proper treatment procedures and also for purposes of teaching. We have the large student nurse group, both basic students of our own school and affiliate students of other schools, and these conferences are valuable in the teaching of psychiatric problems and technique. Twice each week, at least, staff meetings are held for the consideration of individuals who are eligible for discharge from the institution as competent. Throughout the year we have at stated intervals clinics and conferences for groups from the schools of Social Work and Psychology in the universities in the state. These are part of the teaching programs of the various colleges and universities and are scheduled on requests of the individual department.

GENERAL HOSPITAL DIVISION

This division of the hospital is composed of receiving wards, medical and surgical wards and tubercular facilities with a total of 1,002 beds, an increase of 150 beds in the last two years. We are fortunate in having a quite well equipped division, and this includes a surgical section of two operating rooms with sterilizing work facilities and emergency and fracture rooms. An X-ray Department for diagnostic X-ray and deep therapy work is available and a cystoscopic room is combined with this department. A new diagnostic X-ray unit was purchased at the end of the present biennium, and is to be installed shortly after the close of this period. This will greatly facilitate the work in the X-ray Department as the present machine is

quite old and antiquated and is grossly inadequate for many of the newer procedures for diagnosis. It also was physically incapable of keeping up with the load which was thrown upon it, and present facilities were inadequate to handle the number of examinations which were requested of the department. The medical and surgical ward services include a total of 517 beds which handle the work in this field quite well for the white male and female services. Colored medical and surgical patients are handled in their own respective receiving hospital with a section set aside for medical and surgical patients. A new colored hospital is in process of being built, and bids will probably be let after the close of this biennium. In the medical and surgical division we believe our patients receive as good medical and surgical care as can be obtained at any general hospital in the region.

Receiving and active therapy services are composed of 283 beds for white men and 222 beds for white women, 36 beds for colored men and 34 beds for colored women. In these sections all patients are admitted to the respective wards, according to sex and color, and medical and psychiatric examinations are performed and therapy is instituted. Many of the patients who can be rehabilitated in a short while are retained in the active treatment areas and therapy is carried out in this particular area, following which they are then released to their families for return home. If a case appears to require a prolonged period of hospitalization, the individual patient is moved to a continued treatment area after institution of treatment on the receiving service.

The tubercular service has been enlarged by the opening of a new facility in this last biennium, adding approximately 100 beds to the T B division. We have at the present time 143 beds for white patients and 103 for colored patients. In this area the drug therapy for tuberculosis is carried out extensively. Surgical treatment for tuberculosis is being used much more extensively, especially in the last year. The extension of surgery, and the more or less total-push program in regard to drugs for tuberculosis, has resulted in the physical rehabilitation of many of our tubercular patients and the return to continued treatment areas or to their homes.

HEALTH AND NURSING SERVICE

In the last two years we have been quite fortunate in that we have had no outbreaks of any infectious or contagious diseases. All patients and new employees are inoculated for typhoid and vaccinated against smallpox. Constant checking of water supply and milk and food handlers contributes to the continued well-being of patients and personnel. Food handlers are tested at regular intervals to comply with State Board of Health regulations in regard to such personnel. A full-time personnel physician is maintained to look out for the welfare of our employees, and he is also responsible for the medical care for the prisoners who are attached to the hospital for the maintenance and operation of the hospital farm and dairy.

The general hospital has been fortunate in being staffed by competent

nursing services, and all wards are covered by graduate nurse supervisors. However, we have, as has every hospital, been afflicted with a shortage of graduate nurse personnel, and many of the general ward duties and a great deal of the care of the patients is delegated to ancillary personnel. We have been fortunate in having a very good group of aides, attendants and practical nurses in the hospital, and they have contributed greatly to the well-being of our patients in the medical and surgical division. We also utilize the student nurses in the basic training school in the general hospital division, as well as the affiliate nurses who are here for a three months period of time to fulfill the requirements of the State Board of Nursing Education, which requires three months affiliation in a psychiatric facility.

At the end of the biennium we had in this particular service group a staff consisting of 1 director of nurses, 1 assistant director of nurses, 20 registered nurse supervisors, 8 registered nurses on general duty, 3 record clerks, 2 receptionists, 138 orderlies, 121 nurses' aides and 48 maids.

SURGERY

During the preceding biennium the surgical facilities have been extended to patient population to as full degree as possible, and many emergency and elective procedures have been performed which should have contributed a great deal to the improvement of the physical health of the patients and personnel. The operative mortality and post-operative infection rate continues below the accepted level set by the American College of Surgeons.

We have had the benefit of part-time specialists in orthopedics, chest surgery, neurosurgery and urology, and these services have, we feel, greatly expanded our surgical abilities and enhanced the benefits available to our patients.

The Surgical Department also operates a quite active emergency room service where numerous minor procedures are performed and treatments are given, and the department also acts as a central supply agent for all sterile supplies for the institution.

OPERATIVE PROCEDURES	MAJOR	MINOR
General Surgery	108	1,029
Gynecology	108	83
Obstetrics	9	19 (deliveries)
Urology	14	129
Thoracic Surgery	14	39
Neurosurgery	21	0
Orthopedics	40	129
Ophthalmology	26	0
Total operations	340	1,428

Miscellaneous — Surgery and Emergency Room

Ambulatory Treatments	7,433
Blood Transfusions	381
Immunizations	3,972
Examinations (various)	255
Irrigations (Eye, Ear, Bladder etc)	168
Sterile Trays prepared:	
Surgical	2,656
Others	5,119

X-RAY

The program in the X-ray Department has pyramided in the last biennium and this is a natural sequel to the enlargement of the general medical and psychiatric staff. Deep X-ray and radium are available to patients who need such forms of treatment, and we feel that with the installation of a new diagnostic unit here at the institution our scope of diagnostic procedures will be greatly enlarged.

We have also had the benefit, as in previous years, of chest surveys by the State Board of Health, and this has aided in the detection of many chest conditions, both tubercular and otherwise, which had previously not been discovered, and all these suspicious cases were checked for tuberculosis, tumors, and other diseases peculiar to the chest. A breakdown of procedures of the department during the past biennium is given in the following table.

X-Rays	15,893
Barium Enemas	66
G I Series	199
Fluoroscopy Examinations	33
Diathermy Treatments	85
Infra-Red	380
Ultra-Violet	45
Electrocardiograms	57
Deep Therapy	730

SHOCK THERAPY AND DRUG THERAPY

During the past two years electroshock has continued to be used in the institution, but as the months progressed in the biennium we have seen a gradual decrease in the amount of shock which has been used. Insulin shock has been used in very selected cases after a very thorough workup and consultation, but insulin is only used in a minority of individuals.

With the advent of the tranquilizing drugs, the use of shock, as mentioned before, has gradually decreased. We feel that there has been a tremendous effect on the hospital population by the advent and use of the

tranquilizing drugs, and this effect is felt in many ways. The individual patients become more rapidly adjusted to hospital society and life than prior to the use of the tranquilizers. They obviate the use of electroshock, though there are occasions when the tranquilizers and electroshock are used concurrently. There is the absence of fear of such drastic treatment as electroshock, and then there is the tendency of the tranquilizing drugs to make patients much more amenable to psychotherapy.

A very practical aspect of the tranquilizing drug situation in the institution is the decrease in the property destruction by patients who are emotionally disturbed and also a marked decrease in injuries which disturbed patients inflict upon themselves or upon others. As the drugs have grown in their use, we have seen a continuing decline in the number of emergency room visits necessary because of injuries as result of acute emotional disturbance among our patient population. The loss from damage and destruction of such materials as linens, mattresses and clothing has greatly decreased as well with the increased use of our tranquilizing drugs.

The foregoing paragraphs may sound as if the tranquilizing drugs have been the major influence in our betterment of our release rate and attitudes among our patient population. It is felt that tranquilizers have a very definite place in psychiatric therapy, but there are many cases where tranquilizing drugs can not be of any great benefit. Certainly depressive states will still require shock therapy and many of our geriatric cases are helped only in the matter of loss of antagonistic tendencies without any return of real emotional stability. It is felt that probably one of the biggest factors in the change in the last biennium is the increase in the number of staff. We feel the tranquilizers are a tremendous adjunctive therapy, and they have been a very great aid in getting patients to the point where they could receive and accept psychotherapy. However, the tranquilizers are only a part of the picture, and we feel that the combination of increased psychiatric staff and the tranquilizing drugs have played a great part in our improved status.

PSYCHOLOGY DEPARTMENT

The Psychology Department has been in the past two years very active in the psychological investigation of patients referred by various attending staff members. With the increase of psychiatric staff naturally there has been an increase of testing requested and performed by the department, and at the present time there is somewhat of a backlog because of the loss of personnel which is difficult to replace. The department is staffed at the present time by three fulltime psychologists and a secretary. A vacancy is present for another psychologist. We hope to increase the Psychology Department in the next biennial period, feeling a very definite need for this type of ancillary service, and we sincerely hope such plans can be carried out.

Aside from the activities enumerated in the table below, clinics were held for various university groups and the department participated in the 48 hour psychiatric program held for the Public Health personnel every

six weeks. We are also proud of the fact that the members of the department have contributed to knowledge by articles published in the scientific journals and have appeared on sectional and state scientific meetings and served on Psychological Association committees as active participants.

Referrals (Source)

White Male	560
White Female	333
Colored Male	154
Colored Female	53
Total	1100

Tests Administered:

Bender-Gestalt	226
Draw-A-Person	565
Goldstein-Scheerer	25
Intelligence	310
MMPI	238
Rorschach	831
TAT	42
Word Association	234
Wechsler-Bellevue	221
Stanford-Binet	99
Miscellaneous	138
Total	2929

Interviews:

Social History (Child Molester)	19
Inaccessible for Testing	62
*Patients	5
*Relatives	2
Total	88

School of Nursing:

Teaching	433 (hours)
*Applicant Screening	77
Total	510
*Staff Conferences	119
Clinics	7

*From period April 1, 1955 to June 30, 1956

PSYCHIATRIC SOCIAL SERVICE

Shortly after the beginning of the biennium we added to our staff a Psychiatric Social Worker and a first year student who was enrolled in the graduate program in conjunction with the School of Social Work at Florida State University for supervised fieldwork experience. In July 1955 we added two more full time Social Workers to the staff, and have continued the fieldwork placement for graduate students from the Florida State University and gradually expanding our program as the personnel available can handle the training program. It is felt that the graduate fieldwork program has been valuable not only to the students, but also been very valuable to the hospital in that we have been able to provide case work services directly to the patients and their families which could not have been provided with our own skeleton staff.

Since the addition of the Psychiatric Social Worker in September 1954, 897 patients have been given the benefit of social case work services. Services which have been provided include such things as furlough planning for patients, either with their relatives or with friends, and such planning is directed toward the problems which will meet the patient upon his return to the community. Development of detailed social histories from relatives and other sources, such as other institutions, has been carried out for the medical staff for matters of diagnosis and therapy for individual patients. Residence investigations have been carried on through this department, and routine inquiries are sent out on all patients who have not been in the state for the required period of time. Inter-agency reports and requests for information have been frequent in regard to families of patients in the home community, and plans for family-patient readjustment program.

The Social Service department has also been instrumental in the handling of the relationship with the State Board of Health and local health officers throughout the state whereby we have been able to provide a skeleton type of aid to families of patients who are released on furlough from the institution. This program was instigated through the hospital in conjunction with the State Board of Health and the County Health Officers' Association of the state and a liaison established between the hospital and the local health officers. At the present time we send out to the local health officers brief reports on patients who are released from the institution, and these officers make an offer of assistance to families who have no private psychiatrist or private physician interested in giving them psychiatric aid while the patient is at home. The health officers also have the ability, because of close contact with the community, of channelling patients into local mental hygiene units or local psychiatric units for out-patient care. It is felt that the program is a very valuable one, and this department has played a major role in forwarding the program.

A family care program is under consideration at the present time. We have begun a very embryonic form of family care and it is by no means as detailed as we hope to have it in the future. It is hoped that some liaison

with the Welfare Department can be worked out, and possibly legislative appropriation of funds to the Department of Public Welfare for aid in a family care program can be made so that we will be able to plan for care of patients in a foster home setting where the patient's own home is either not available or not suitable for out-of-the-hospital readjustment care.

The State Vocational Rehabilitation Service assigned a vocational counselor to the institution for a period of two days each week beginning in May 1956, and close contact with this Service and the Social Service Department has begun to show results in the matter of placement of patients in vocational areas when they are able to leave the institution.

The department has also been involved in the program of teaching in the School of Nursing and is carrying on courses with basic students as well as affiliate nurses at the hospital. They have spent considerable time with the visiting groups from the Florida Universities, indoctrination programs for County Health Nurses, the Graduate Nurses' Association and other groups who are interested in the field of mental health. Investigations are made at regular intervals to points of placement of patients in our family care program, and we are constantly carrying on a program of home visitation prior to the release of patients to non-relatives.

It is hoped in the next biennium to double the number of social workers we have, and in the future to gradually increase our Psychiatric Social Service Department as we feel that it is a very valuable ancillary service and a very necesasry part of the psychiatric program.

OCCUPATIONAL THERAPY

In the Occupational Therapy Department the patient is afforded an opportunity for self-expression, and by his expression in the field of manual art, painting, design and construction many obscure psychiatric manifestations are exhibited. The area of the Occupational Therapy clinic is quite conducive to expression of inter-personal relationships and attitudes, and the therapist often can initiate and cultivate a healthy attitude of cooperation on the part of individual patients in relation to their fellowman. Properly directed occupatioinal therapy is ofttimes the initial inroad to a very regressed patient and is the point of departure for a long range program for rehabilitation of this particular type of patient. There is no such thing as routine occupational therapy program to cover large masses of emotionally disturbed people. Programs for treatment must be individualized and suited to the recipient's capabilities, and when the capability of the patient is once discovered it is enlarged upon to bring the individual into more realistic contact with his environment and toward an adequate social adjustment.

Treatment is prescribed by the attending psychiatrist and the therapist plans treatment to suit the individual who is referred. Important in the progress of the patient are frequent observations which are relayed to the

psychiatrist to be correlated with the psychotherapeutic management of the case and the encouragement by the therapist as the patient progresses, of working not only with his own particular individual project, but of helping other less advanced patients with their work and rehabilitation.

The Occupational Therapy Department has gradually expanded and in the last two years 1,808 men and women patients were served. It was felt that 1,591 of these patients showed some progress during their stay in the occupational therapy program and that of the number of patients who have taken part in the program 633 have been returned to their homes. The Occupational Therapy Department is proud to have been of service to these patients who have gone home, and feels as if they have contributed something toward their rehabilitation. The department at the present time consists of nine clinics and one beauty parlor. The staff includes an O T R Director, one O T R Assistant Director, one cooking instructor, seven O T aides and one licensed beautician.

During the latter part of the biennium an occupational therapy clinic was organized and put into operation in the tuberculosis facility. This is a very important area for occupational therapy and one which we have been trying to get started for quite some while. Tuberculosis is a disease which is characterized by chronicity and the individual patient is afflicted not only with an emotional disturbance but a physical one as well, both of which often are quite chronic and debilitating and here we feel that a dual situation is present which requires attack from all possible angles. Boredom among tuberculosis patients is a very prominent feature, and it is felt that anything that can be used to occupy their hands as well as their mental processes will bring about a more rapid recovery both of physical as well as mental disabilities.

In addition to the work with our patient population alone, the department has participated in the teaching program for student nurses, both of our own school and the affiliate groups. This teaching is part of their regular curriculum and regular lectures and occupational therapy craft classes were held for student nurses during the past biennium. 428 student nurses were involved in these, and it is felt that a definite benefit was obtained by demonstration of the types of therapy used for rehabilitation of emotional illness.

Various volunteer groups have continued to contribute extensively to the welfare of our patients, and we express our appreciation to them for their interest and cooperation. The Chattahoochee Garden Club in District Two was responsible for a garden therapy program for the patients, and various club members conducted monthly meetings for patients interested in this type of program and had as well Christmas parties and Summer parties for the patients. The local religious organizations sponsored monthly birthday parties and religious services as well as Christmas parties for our patients. The Methodist, Baptist and Episcopal churches were all quite active. The Christian Science group sponsored regular services and Christ-

mas parties, and the Jewish Church had monthly services for patients who were of that faith.

Special activity other than the above mentioned were carried on by the Women's Clubs for groups of patients in special areas, and participation in the Christmas festivities were carried out by the American Legion Auxiliary who sponsored a party and donated cigarettes to 307 of our veterans patients.

As heretofore, we have been very fortunate in the interest that the Beta Sigma Phi sorority, the Florida Federation of Women's Clubs, the Pilot Clubs and the Mental Health Societies have shown at Christmas time by the donation of thousands of gifts for our patients. These gifts are sent to the hospital and labeled as to whether for a male or female patient and are distributed to our patient population at Christmas. This has had a tremendous impact on our patients in that many of our patients who have never had anything at Christmas time, prior to the participation of these groups, have had the feeling that they once again belonged in Society and that someone does care about their welfare. We feel at the hospital that this activity has been extremely beneficial and has been very well accepted by our patient population.

SCHOOL OF NURSING EDUCATION

The School of Nursing has made effective progress in certain areas during the past biennial period. We note for consideration, progress in recruitment, particularly as regards the quality of students admitted to the School. There has been constant improvement in the facilities for student nurses. A new and modern laboratory for study of food preparation has been built. The student library has been enlarged. It now contains 850 volumes and 12 current publications. There is adequate space for study and excellent lighting. In the residence laundries, kitchenettes, and a lounge have been added for student use and recreation.

The educational advancements show curricula in both the basic school and the Psychiatric affiliating area, which meet the present standards for accreditation by Florida State Board of Nurse Registration and Nursing Education. Personnel policies for student nurses also meet the above standard.

An Advisory Committee consisting of representative members in Education, Health and Community affairs now assists in the guidance of the School of Nursing activities.

One new program of state-wide interest is the 48-Hour Orientation in Psychiatry for Public Health personnel. Since October 1955, in the five meetings which have been conducted at Florida State Hospital, twelve (12) Health Officers and thirty-five (35) Public Health Nurses, representing twenty-three (23) counties in the State, have attended. There have also been seven (7) representatives from various divisions of the Florida State Board of Health. It is our feeling that after this visit, each state employed

health worker is better prepared to assist the mentally ill persons in the community, to assist the local mental health programs, and to interpret the institutions for the mentally ill.

Number of students admitted to basic School of Nursing	16
Number of students graduated from basic School of Nursing ..	23
Number of students separated from basic School of Nursing ..	26
Number of reasons—marriage or personal	16
Number with scholastic inadequacy	10
Number of schools affiliating in Psychiatric Nursing	13
Number of students affiliating in Psychiatric Nursing	343
Number of affiliating students now enrolled at Florida State Hospital School of Nursing	90

It is the aim of this department to continue to move forward in the new and progressive areas in nursing education to that end that we meet the requirement for full national accreditation. This will derive in a reputation for preparing good nurses; it will serve to attract good students, and will assure the graduates of the School of full recognition in situations wherever they may choose to continue their nursing careers.

We look forward, also, to a continuous unified program of in-service education for all levels of employees as an addition to the service rendered by this Department.

PHARMACY

The Pharmacy has continued in a very active fashion in the last biennial period, being responsible for the requisitioning and disbursement of all drugs used in the hospital. We have carried at all times a quite large inventory of drugs, especially in the tranquilizing drugs, as they have been used extensively in the institution. By virtue of the quantity purchased we have been able to furnish these drugs to the hospital at a minimum cost.

Management of the Pharmacy is under the direction of a registered pharmacist and he is assisted by a stock clerk.

CLINICAL LABORATORY

The Clinical Laboratory is under the direction of a full-time pathologist with the budgeted staff of seven medical technologists. The present staff consists of five technologists, and at the present time there are three students enrolled in the approved School of Medical Technology.

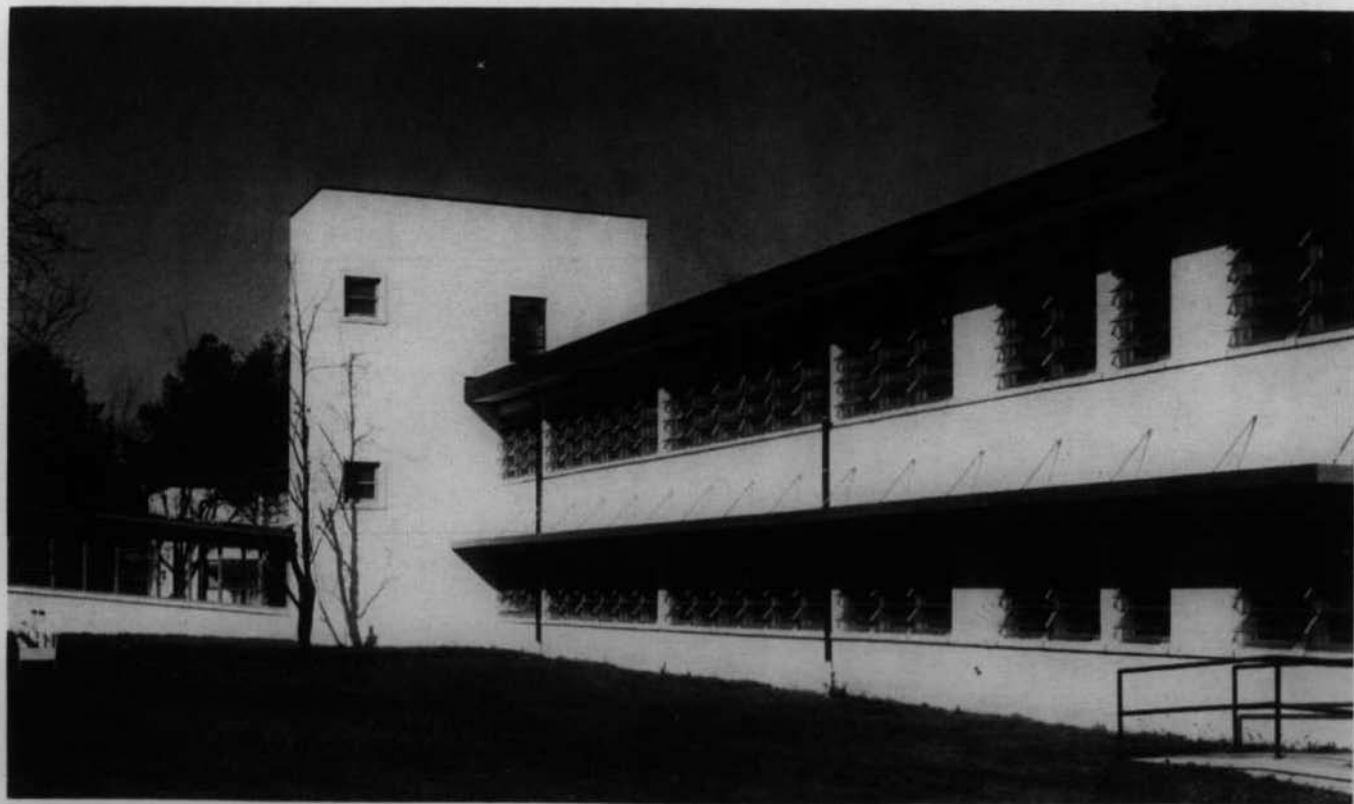
The pathologist and chief technologist devote some 200 hours per semester to teaching pathology, microbiology and chemistry in the School of Nursing.

As of February 18, 1955 the Blood Bank was expanded and incorporated as a function of the Laboratory, since then 381 pints of blood have been used. The current rate of use is approximately 30 pints per month.

There was a total of 897 deaths, with 326 autopsies performed. This is 36.3 percent of all deaths.

The following is a list by department of the various examinations performed:

Bacteriology	12,006
Serology	15,024
Hematology	50,237
Chemistry	19,561
Parasitology and Urinalysis	51,237
Autopsies	326
Tissue Examinations	3,187
Plebotomies	381
Total	151,959



NEW ADDITION TO THE HOSPITAL FOR THE CARE OF PATIENTS
WITH TUBERCULOSIS

DENTAL SERVICE

During the biennium the Dental Service at the Florida State Hospital has been expanded so that at present there is a Chief Dentist, six dental interns, six dental assistants, a record clerk, a stock clerk, three laboratory technicians and a maid.

Due to the fact that the dentistry is done largely by interns, and because the internship is approved by the American Dental Association, it has been necessary to have dentists in several specialties spend a day each month lecturing and demonstrating to the interns. This service, which has resulted in more efficient dental care for hospital patients, has been given without fee, other than travel expenses, by Dr. Winburn A. Sherouse of Lakeland, and by Dr. Frank T. Scott of Jacksonville.

In the two year period a number of physical improvements have been made, such as the installation of a second X-ray machine in surgery; the reconditioning and placement back into service of the nitrous oxide oxygen anesthesia apparatus; the installation of several more wall aspirators, so that all eight operating rooms are so equipped; additional oil sterilizers purchased, so that there is one in each operating room with a larger one in surgery; a new time saving autoclave has been installed for sterilization of all syringes, root canal instruments, etc; an amalgamator has been so situated that it is used for all operating rooms; the hydrocolloid equipment has been placed on a cart making it easily transportable from one operating room to another; a large number of new books have been added to the library; a record player and speaker system has been installed with soothing music audible in all waiting rooms and operating rooms; and the building has been completely painted inside and outside.

Following is a list of the amount of work done in various phases of dentistry during the period:

Examinations	17,338
Extractions	11,100
Oral Surgery	744
Treatments	10,424
General Anesthetic Cases	72
Fracture Cases	8
Oral Prophylaxis	2,431
Periodontal Treatments	895
Root Canal Fillings	17
Dentures relined	45
Study Models	443
Dentures	705
Dentures Repaired	602
Denture Adjustments	1,827
Fixed Bridges	365
Bridge Repairs	83

Crowns and Jackets	140
Gold Inlays	80
Amalgam Fillings	8,428
Porcelain Fillings	1,489
Gold Foil Fillings	156
Full Mouth X-Rays	1,408
Bite Wing and Single X-Rays	12,271
Occlusal and Lateral Jaw X-Rays	343
Hospital or Ward Visits	1,336
Total Patients seen	50,034

RECREATION

The enjoyment and interest created by various activities carried on under our recreational program have contributed much toward the welfare of our patients, not only from entertainment derived, but also from a therapy viewpoint. Recreation in this particular field essentially requires that programs be planned in such a manner and variety as to encourage interest and participation of different groups.

Our large group social activities include round dancing, square dancing, and motion pictures provided weekly in our large recreation hall. Dance music is furnished by hospital orchestra and string band consisting of employees and patients. Large groups of patients also attend high school football games and soft-ball games held on our athletic field.

Small groups, who may go to the recreation hall but are unable to join in large group activities, participate in folk dancing, round dancing, singing, group games and table games. Many also participate in such outdoor games as shuffleboard, volleyball, basketball, loop tennis and softball.

Other indoor recreation for those who are unable to attend programs held in our general recreation hall consist of motion pictures, shown each week in the various patient buildings by means of portable projectors, table games and entertainment provided by radios and record players. Pianos are located in the various departments where day room space is available. We also have a few television sets in operation and plan to install additional sets in the new buildings just completed.

We express our sincere thanks to outside groups and individuals who have provided special entertainments, such as band concerts, plays and parties for our patients, as well as for their contributions of recreational supplies and equipment, such as television sets, radios, phonographs and various games.

EASTERN STAR LIBRARY

Our library is operated under supervision of a librarian, assisted by a group of patients usually numbering around fifteen. Such work is a form of occupational therapy and has proved of considerable benefit to those who

participate. Twenty-three of those who worked in the library have returned to their homes during this biennium, being replaced by others selected for this therapy activity.

Various organizations and individuals have been most generous in their contributions of magazines and books. The hospital has also purchased an increased number of periodicals through subscription. Books and magazines are recorded in the library as they are received and circulations are made to the various patient departments for the enjoyment of those who like to read. A small book repair shop is also operated in connection with the library. This work, done by patients, consists of rebinding books and binding of certain periodicals.

Volume activities in this library are listed below for the biennium:

Received:

Books donated	2,484
Magazines donated	56,458
Magazines purchased	3,428

Circulation:

Books	26,938
Magazines	59,886

Book Repairs:

For this library	3,165
For Medical libraries	542

Book inventory this library June 30, 1956	14,474
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CHAPLAINCY

There has been maintained during the biennium a very helpful program of religious ministry to which patients have responded in a most satisfactory manner.

While the general work of the Chaplain's religious ministries may be visualized as a continuous spiritual influence maintained through regular religious services held for large groups, the Chaplain's duties also include spiritual aid and comfort to individuals, providing them with the satisfactions of religious faith, trust and hope for the future. The benefits derived from these things are doubtless of material therapeutic value, providing comfort and assurance so urgently needed toward recovery of those who are ill.

The Chaplain works closely with physicians and other staff members, participates in referral work with them, and arranges with nurses the many details required in ministering to patients on the basis of their individual needs. This involves many personal interviews and discussions with individuals, not only as a matter of routine, but also on request by staff members, as well as requests from patients or their families.

The present work of the Chaplain also includes direction of choral music in connection with worship services. Another important division of religious work here includes distribution of religious literature. Bibles, Testaments, Prayer Books, Church Periodicals and Song Books are in much demand. We have been fortunate in receiving current copies of popular daily devotional booklets but need many more. Church groups have helped and can help much more by furnishing us with current issues of such booklets as "Open Windows", "The Secret Place," "Forward", "Day by Day", "Today", and other equally fine booklets.

Other duties of the Chaplain include correspondence with patients' relatives, answering their inquiries with regard to things of religious nature and giving assurance in times of critical illness or death of their loved ones. Small-group worship services are held for those who, because of infirmity, are unable to attend regular chapel services held in our auditorium. Bed-side prayers and consultations are held for the benefit of those who become critically ill.

In addition to regular services conducted by our Chaplain, the Roman Catholic and the Episcopal Churches regularly conduct services, and other Churches hold occasional services for various denominational groups. Religious services for colored patients are conducted by their own minister.

Three ministers have served in the Chaplaincy during this biennium. The Reverend Wayne Duden served until February 28, 1955; The Reverend W. C. McGarity from March 1, 1955 until May 31, 1955; the Reverend Leslie A. Shepherd, our present Chaplain, since June 1, 1955.

ADMISSIONS TO THE HOSPITAL DURING THE FISCAL YEAR 1954-1955

	PATIENTS IN HOSPITAL	Admitted on Commitment	Returned from furlough	Returned from escape	Readmitted on former commitment	Returned furlough on new commitment	Committed by Criminal Court of Record	Sent here from Arcadia	Admitted through error without papers	Sent here from Florida Farm Colony	From furlough, having been furloughed from Arcadia	Committed by Circuit Court	Committed to be transferred to another state	Committed by Court of Record	Committed by Criminal Court of Record while on furlough	Admitted by birth
July.....	6,490	130	30	3	2	1	2									1
August.....	6,514	149	44	5	4		1	1	1							
September.....	6,556	127	35	2	1	1				1	1	1				1
October.....	6,611	124	35	2	4		2	1				2				1
November.....	6,632	131	33	2	1		6					1				
December.....	6,657	117	26	3	3		2					4	2			1
January.....	6,636	107	38	6	4	1	4									1
February.....	6,670	120	35		1		2	1				5				
March.....	6,727	123	30	4	1		3	1				2				
April.....	6,709	128	28		2		6			1		2				
May.....	6,709	139	38	1	4		3	1				3		1		2
June.....	6,718	141	33	1	3		1					4			1	
		1,536	405	29	30	3	32	5	1	2	1	24	2	1	1	7

ADMISSIONS TO THE HOSPITAL DURING THE FISCAL YEAR 1955-1956

	PATIENTS IN HOSPITAL	Admitted on Commitment	Returned from furlough	Returned from escape	Readmitted on former commitment	Returned turlough on new commitment	Committed by Criminal Court of Record	Sent here from Arcadia	Committed by Circuit Court	Admitted by order of Circuit Court for observation & exam.	Sent here from Florida Farm Colony	Admitted by Authority of Board for observation & examination	Admitted to be transferred to another state	Committed by Criminal Court of Record while on furlough	Voluntary admission	Admitted from State Prison Farm for observation & exam.	Readmitted—voluntary patient	Admitted by birth
July.....	6,725	121	46	1			5		2	1	1	2	1					1
August.....	6,753	145	38	1	1		2		1									
September.....	6,754	121	30	1	3		2	1										
October.....	6,770	117	19	1			4		1									1
November.....	6,753	134	19	1	1		8					1		1				1
December.....	6,758	120	38	4	1		2		2						1			1
January.....	6,679	125	47		2		2	1	3						1			1
February.....	6,715	130	40	3			3			1					2	1		
March.....	6,734	145	32			4	1							1	1			1
April.....	6,723	135	47	2	1		3	1	3						4			
May.....	6,626	164	50	2	1		7		6	1							1	
June.....	6,601	114	40		3		8		5	1	1							
		1,571	446	16	13	4	47	3	23	4	2	3	1	2	9	1	1	6

SEPARATIONS FROM THE HOSPITAL DURING THE FISCAL YEAR 1954-1955

	Furloughed	Discharged	Died	Escaped	Babies sent home	Transferred to Veterans' Hospitals	Returned to Industrial School for Girls at Ocala	Discharged—transferred to other states	Discharged, having been admitted in error	Discharged, returned to Prison Camp at Moore Haven	Discharged, returned to Court	Transferred to Florida Farm Colony	Returned to State Prison Farm	Transferred to Arcadia	Discharged to be deported	Babies dying	Transferred to TB Sanatorium in Tampa	REMAINING
July.....	97	10	31	3	2	1	1	3	1	1	1							6,514
August.....	92	14	42	7		2		2										6,556
September.....	76	8	21	6		2		2										6,611
October.....	100	8	28	2	1	7		4										6,632
November.....	93	3	43	4	1	3		1				1						6,657
December.....	118	8	47	4	1			1										6,636
January.....	71	6	35	11	1			2					1					6,670
February.....	61	8	29	3		6												6,727
March.....	89	6	39	2		2		3						40	1			6,709
April.....	92	5	42	4		1		2						20	1			6,709
May.....	106	13	49	4		4		4							1	2		6,718
June.....	124	2	39	7		2		2									1	6,725
	1,119	91	445	57	6	30	1	24	1	1	1	1	1	60	3	2	1	

621 discharged while out on furlough.

53 discharged while out on escape.

SEPARATIONS FROM THE HOSPITAL DURING THE FISCAL YEAR 1955-1956

	Furloughed	Discharged	Died	Escaped	Babies sent home	Transferred to Veterans' Hospitals	Discharged—transferred to other states	Discharged—returned to court, admitted for observ. & exam.	Discharged—returned to court	Returned to State Prison Farm—admitted for observ. & exam.	Transferred to Arcadia	Discharged—returned to Criminal Court of Record	Returned to State Prison Farm	Escaped with husband	Transferred to Florida Farm Colony	Babies dying	Discharged—returned to Criminal Court	Discharged on request—voluntary admission	Discharged to be deported	REMAINING
July.....	100	12	26	5	.....	8	.....	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	6,753
August...	105	10	37	2	.....	9	3	.....	.....	1	20	.....	.....	.....	.....	.....	.....	.....	.....	6,754
September	100	6	29	3	.....	1	1	.....	.....	.....	.....	1	1	.....	.....	.....	.....	.....	.....	6,770
October...	114	5	30	3	2	1	4	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	6,753
November	109	12	30	.....	.....	6	1	.....	.....	.....	.....	.....	2	.....	1	.....	.....	.....	.....	6,758
December	172	19	46	4	.....	5	.....	.....	.....	1	.....	.....	.....	.....	.....	1	.....	.....	.....	6,679
January...	62	13	56	.....	1	6	4	.....	.....	.....	1	.....	.....	.....	.....	.....	2	1	.....	6,715
February...	95	22	32	3	1	3	3	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	6,734
March....	114	39	35	1	1	2	1	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	2	.....	6,723
April.....	119	25	44	3	.....	1	1	1	.....	.....	97	.....	.....	.....	.....	.....	.....	1	1	6,626
May.....	85	37	49	2	.....	3	6	.....	.....	.....	72	.....	.....	.....	.....	.....	.....	3	.....	6,601
June.....	105	30	38	.....	.....	2	3	.....	1	.....	73	.....	.....	.....	.....	.....	.....	.....	.....	6,521
	1,280	230	452	26	5	47	27	2	2	3	263	1	4	1	1	1	2	8	1	

679 discharged while out on furlough.

9 discharged while out on escape.

ADMISSIONS BY COUNTIES

	July 1, 1954, through June 30, 1955					July 1, 1955, through June 30, 1956				
	WM	WW	CM	CW	Total	WM	WW	CM	CW	Total
Alachua.....	8	4	8	2	22	9	13	4	6	32
Baker.....	1	1	0	1	3	4	2	0	0	6
Bay.....	11	8	0	3	22	13	17	2	1	33
Bradford.....	2	3	4	0	9	3	1	1	0	5
Brevard.....	1	7	5	3	16	4	6	6	6	22
Broward.....	17	12	6	10	45	30	19	17	8	74
Calhoun.....	5	5	0	0	10	4	5	0	1	10
Charlotte.....	1	0	0	1	2	1	0	0	0	1
Citrus.....	2	1	1	0	4	3	4	0	2	9
Clay.....	4	1	1	0	6	4	1	0	2	7
Collier.....	2	1	0	1	4	1	4	1	0	6
Columbia.....	3	2	1	7	13	4	11	7	1	23
Dade.....	70	59	31	18	178	58	53	15	17	143
De Soto.....	0	4	2	0	6	0	0	1	0	1
Dixie.....	1	1	0	0	2	0	1	0	1	2
Duval.....	44	44	41	30	159	43	44	34	43	164
Escambia.....	38	36	10	13	97	32	39	13	10	94
Flagler.....	0	3	3	3	9	2	0	0	0	2
Franklin.....	3	2	0	1	6	4	2	0	2	8
Gadsden.....	10	13	6	11	40	11	12	9	11	43
Gilchrist.....	0	0	0	0	0	1	2	0	0	3
Glades.....	0	0	0	0	0	0	0	0	0	0
Gulf.....	2	1	0	0	3	1	3	1	1	6
Hamilton.....	0	0	2	0	2	2	4	2	1	9
Hardee.....	4	1	0	0	5	2	1	0	0	3
Hendry.....	0	2	1	0	3	1	0	1	0	2
Hernando.....	2	1	0	0	3	1	0	0	0	1
Highlands.....	4	0	4	2	10	4	3	0	1	8
Hillsborough.....	62	57	23	27	169	61	59	22	13	155
Holmes.....	7	2	0	0	9	3	5	0	0	8
Indian River.....	3	3	0	2	8	4	2	3	1	10
Jackson.....	16	9	4	7	36	20	9	4	8	41
Jefferson.....	3	2	3	1	9	4	3	4	4	15
LaFayette.....	2	1	0	0	3	2	3	0	0	5
Lake.....	5	10	1	3	19	8	9	3	3	23
Lee.....	6	4	7	0	17	2	3	2	3	10
Leon.....	20	10	12	13	55	13	15	7	10	45
Levy.....	2	2	5	0	9	1	3	0	0	4
Liberty.....	1	2	1	0	4	4	1	1	0	6
Madison.....	3	3	4	3	13	4	3	3	4	14
Manatee.....	5	10	4	3	22	10	13	3	3	29
Marion.....	6	11	4	5	26	12	13	4	7	36
Martin.....	2	1	1	1	5	0	0	1	0	1
Monroe.....	3	4	3	0	10	7	4	1	0	12
Nassau.....	0	1	4	0	5	4	0	1	2	7
Okaloosa.....	17	14	2	0	33	10	4	1	3	18
Okeechobee.....	0	0	0	0	0	0	0	0	0	0
Orange.....	19	22	8	7	56	37	23	5	7	72
Osceola.....	5	3	1	0	9	4	4	0	1	9
Palm Beach.....	23	31	23	13	90	34	26	15	15	90
Pasco.....	3	7	0	1	11	5	4	0	1	10
Pinellas.....	18	17	3	9	47	22	36	6	2	66
Polk.....	26	17	10	14	67	22	14	10	7	53
Putnam.....	10	8	4	5	27	4	6	1	4	15
Santa Rosa.....	4	4	0	0	8	0	1	0	1	2

ADMISSIONS BY COUNTIES—Continued

	<i>July 1, 1954, through June 30, 1955</i>					<i>July 1, 1955, through June 30, 1956</i>				
	WM	WW	CM	CW	Total	WM	WW	CM	CW	Total
Sarasota.....	5	7	5	2	19	2	5	3	2	12
Seminole.....	8	5	5	8	26	7	4	4	2	17
St. Johns.....	4	7	2	3	16	4	10	4	3	21
St. Lucie.....	2	1	1	1	5	2	3	5	2	12
Sumter.....	2	1	2	0	5	5	1	1	1	8
Suwannee.....	9	6	1	3	19	10	5	1	0	16
Taylor.....	4	3	1	0	8	5	4	2	0	11
Union.....	1	2	6	0	9	12	0	2	0	14
Volusia.....	22	22	9	2	55	23	13	13	8	57
Wakulla.....	4	1	2	1	8	1	0	0	0	1
Walton.....	7	6	1	1	15	9	12	1	0	22
Washington.....	9	2	0	0	11	6	8	2	4	20
Totals.....	583	530	288	241	1,642	625	575	249	235	1,684

DEATH RATE AT THE FLORIDA STATE HOSPITAL
OVER A PERIOD OF FOURTEEN YEARS

<i>Fiscal Year</i>	<i>Patients Treated During Year</i>	<i>Deaths During Year</i>	<i>Death Rate per 1,000 Patients</i>
1955-56.....	8,877	452	51.0
1954-55.....	8,569	445	52.0
1953-54.....	8,321	348	41.8
1952-53.....	7,905	379	47.9
1951-52.....	7,649	393	51.3
1950-51.....	7,318	335	45.7
1949-50.....	7,035	391	55.5
1948-49.....	6,449	348	53.9
1947-48.....	6,526	385	59.0
1946-47.....	6,494	411	63.3
1945-46.....	3,548	400	61.0
1944-45.....	6,405	402	62.7
1943-44.....	6,432	451	70.1
1942-43.....	6,350	380	59.7

PSYCHOSES OF ADMISSIONS

	July 1, 1954, through June 30, 1955					July 1, 1955, through June 30, 1956				
	WM	WW	CM	CW	Total	WM	WW	CM	CW	Total
ACUTE BRAIN SYNDROME ASSOCIATED WITH:										
1. Alcoholic Intoxication.....	15	3	7	0	25	13	1	14	6	34
2. Drug or Poison Intoxication (except Alcohol).....	2	0	0	1	3	1	0	0	0	1
3. Convulsive Disorder.....										
4. All Other Conditions.....			1		1	2				2
5. TOTAL ACUTE BRAIN SYNDROMES.....	17	3	8	1	29	16	1	14	6	37
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
6. Diseases and Conditions due to Prenatal (Constitutional) Influence.....		1			1	1	1	1		3
7. Meningoencephalitic Syphilis.....	6	8	6	9	29	13	5	14	8	40
8. Other CNS Syphilis.....	5	1	20		26	10		1		11
9. Epidemic Encephalitis.....	3		1		4	1	1			2
10. Other Intracranial Infections.....							1			1
11. Alcohol Intoxication.....	37	14	18		69	16	7	9		32
12. Drug or Poison Intoxication (except Alcohol).....	4			1	5	6	1		1	8
13. Birth Trauma.....	3		1		4	7	2	3		12
14. Other Trauma.....	11	1			12	7	4	1		12
15. Cerebral Arteriosclerosis.....	128	76	75	49	328	93	71	47	45	256
16. Other Circulatory Disturbance.....	11	4	1	2	18	28	8			36
17. Convulsive Disorder.....	18	27	11	8	64	30	19	11	9	69
18. Senile Brain Disease.....	1	36	1		38	11	54		4	69
19. Other Disturbance of Metabolism, Growth, and Nutrition.....	1	4			5	3	5	1		9
20. Intracranial Neoplasm.....	1				1	2				2
21. Diseases of Unknown and Uncertain Cause.....	1	5	2		8	12	13	4		29
22. Chronic Brain Syndrome of Unknown Cause.....	1	3			4	5	7	1		13
23. TOTAL CHRONIC BRAIN SYNDROMES.....	231	180	136	69	616	245	199	93	67	604
PSYCHOTIC DISORDERS:										
24. Involutional Psychotic Reaction.....	12	55		22	89	21	38		22	81
25. Manic Depressive Reaction.....	41	36	7	16	100	52	56	4	11	123
26. Psychotic Depressive Reaction.....						2	4	3		9

PSYCHOSES OF ADMISSIONS—Continued

	July 1, 1954, through June 30, 1955					July 1, 1955, through June 30, 1956				
	WM	WW	CM	CW	Total	WM	WW	CM	CW	Total
27. Schizophrenic Reaction.....	176	190	99	94	559	154	191	86	103	534
28. Paranoid Reactions.....	3	1			4	7	4			11
29. Other.....			1		1			4		4
30. TOTAL PSYCHOTIC DISORDERS.....	232	282	107	132	753	236	293	97	136	762
31. PSYCHOPHYSIOLOGICAL AUTONOMIC AND VISCERAL DISORDERS:							2			2
32. PSYCHONEUROTIC REACTIONS.....	6	7	1	1	15	20	15			35
PERSONALITY DISORDERS:										
33. Personality Pattern Disturbance.....	2		1		3	5	2			7
34. Personality Trait Disturbance.....	6	4			10	7	13	7		27
35. Antisocial Reaction.....	19	9	4		32	13	4			17
36. Dyssocial Reaction.....	2				2	4	2			6
37. Sexual Deviation.....			1		1	8				8
38. Alcoholism (Addiction).....	13	4		2	19	36	9	2		47
39. Drug Addiction.....		3			3	3				3
40. Special Symptom Reaction.....						1				1
41. TOTAL PERSONALITY DISORDERS.....	42	20	6	2	70	77	30	7	2	116
42. TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....		3	1		4	3	1	1		5
43. MENTAL DEFICIENCY.....	55	30	16	16	117	28	31	11	13	83
44. MENTAL DISORDER, UNDIAGNOSED.....			12	18	30			21	8	29
45. WITHOUT MENTAL DISORDER.....		5	1	2	8		3	5	3	11
46. GRAND TOTAL.....	583	530	288	241	1,642	625	575	249	235	1,684

FOOD SERVICES

It is well recognized that good food is a highly important factor in the care and treatment of our patients. Not only must meals be appetizing, they must also be planned in such manner as to furnish proper nutrition. Food expense is the largest single expense item in our operations, accounting for approximately half of our expense appropriation, so we must give close attention to economy in order to provide adequate diets at reasonable cost. Many special diets must be prepared for those patients who, because of various physical infirmities, require specially designed meals.

In general, our food services are comprised of six kitchens with food serving facilities set up to prepare and serve meals to various sections of the hospital. These various food departments are listed below, along with information as to sections of the hospital served by each and the approximate number of meals prepared by each kitchen daily:

GENERAL KITCHEN—111 Employees: Prepared 16,600 meals per day; serves continued treatment sections of the hospital; under management of Chief Steward. A bakery, supplying bread needs for the entire hospital, and a meat cutting room, distributing meats to our other smaller kitchens, is also operated at this location. Four large dining rooms for patients and two small dining rooms for personnel are also operated in connection with our general kitchen. During the biennium one of the large dining rooms for women patients has been completely renovated and refurnished, greatly improving conditions in this area. The floor was resurfaced with terrazzo, better lighting provided, new cafeteria facilities installed, and interior re-painted. Also, new metal tables with formica tops and aluminum chairs replacing the old wooden tables, chairs and benches formerly used. Feeding has been divided into two shifts, eliminating crowding and creating a more pleasant atmosphere for patients, who take their meals in this large dining hall. This is the first phase of our program for renovating and re-equipping dining rooms in this area.

GRAY KITCHEN—19 Employees: Prepared 1,200 meals per day; serves receiving and intensive treatment sections of the hospital; under management of the Chief Steward. In addition to the two buildings formerly served by this kitchen, food is also prepared here for the new women's receiving unit occupied in the last month of this biennium. Most patients take meals in dining rooms.

DIET KITCHEN—30 Employees: Prepared 1,350 meals per day; serves medical and surgical sections of the hospital under supervision of registered dietitian. Many special diets are prepared in this kitchen under direction of the dietitian, and meals going to the various medical and surgical wards are transported in electrically heated food conveyors. A small dining room for staff members and nursing personnel is also operated in connection with this kitchen.

PARK TRAMMELL INFIRMARY KITCHEN—20 Employees: Prepared 1,500 meals per day; serves large new geriatrics building by this name, activated in April, 1956. Under supervision of the dietitian. While the majority of patients in this building take their meals in the several small dining rooms provided on each floor, some must be served in wheel chairs or in bed. Food for these is transported in electrically heated food conveyors. Due to advanced age and infirmities of patients in this building, the kitchen must prepare many special diets to meet individual requirements. This new food service is of inestimable value in supplying the dietary needs of the elderly and infirm patients receiving care and treatment here.

NEW TUBERCULOSIS HOSPITAL KITCHEN—8 Employees: Prepared 700 meals per day; serves tuberculosis section of our hospital; under management of the dietitian. This new kitchen, constructed along with new addition to our tuberculosis hospital, was placed in operation in this biennium. It is designed and equipped for the preparation and distribution of meals to patients who are ill with tuberculosis and require special feeding. This new food service has resulted in much improved food service for these sick people and has eliminated certain hazards formerly present when food had to be transported from other area kitchens.

AMOS INFIRMARY KITCHEN—15 Employees: Prepared 1,260 meals per day; serves geriatrics building by this name; under supervision of experienced steward. Meals prepared in this kitchen are transported to serving rooms on each floor and served to the patients from there. Food must be specially prepared to meet requirements of the aged and infirm patients cared for and treated in this building. In addition to regular meals, milk shakes and fruit juices are also served between meals. Special diets are prepared for those suffering from diabetes or other illnesses necessitating dietary control.

CONSTRUCTION DEPARTMENT

This report covers major activities of the Construction Department for the biennium 1955-1956. This department is charged with the maintenance of all hospital buildings comprising a total of 258 in number and ranging in size from small auto garages to the large hospitals, infirmaries, utility buildings, etc., with a good many projects involving complete renovation of existing buildings. Some new construction involving small buildings and additions is also performed by this department where practical and to the best interest of the State. Listed below are the prin-

cipal new additions and major repair projects completed, or in progress, by our construction forces during the reporting period:

- Completed remodeling and rebuilding of east wing of white female building No. 6, replacing wood interiors and frame porches with masonry and steel construction, covering new concrete floors with asphalt tile, providing additional bath rooms and elevator, installing awning type aluminum windows and steel detention screens, painting exterior and interior surfaces, etc.
- Began remodeling and renovation of center and west sections of building No. 6, involving same type work as accomplished on east wing above reported, with exception that no elevator included in this project. This work still in progress.
- Additions to laundry building to provide 5,600 ft. additional floor space; adding toilets.
- Removed and rebuilt grist mill building.
- Installed small kitchen and wash room in Landis Hall.
- Small addition to temporary office of engineering department.
- Provided office space and small toilet addition for plumbing and electric warehouse and shops.
- Remodeled and rebuilt approximately one-third of colored male ward building No. 37, replacing wood interiors and frame porches with masonry and steel construction, providing additional bathroom areas, painting exterior and interior surfaces, and reroofing this section.
- Remodeled and rebuilt interiors of residences No. 270 and No. 122, as well as interior of duplex apartment No. 267.
- Completely rebuilt two farm residences.
- Completed six new staff residences, which were approximately 50% complete at beginning of this biennium, and constructed three single garages and one double garage with transformer vault and boiler room to supply hot water to residences.
- Installed foundation for new 250,000 gallon water storage tank.
- Constructed three transformer vaults.
- Constructed small storage building at sewage disposal plant.
- Installed concrete floor in basement of colored male ward building No. 38.
- Installed concrete floor in foundry building.
- Installed concrete floor in basement of auditorium and remodeled interior space for use of sewing room, providing toilet areas.
- Installed Vinyl asphalt floor tile in T. B. hospital building No. 244.
- Installed concrete floor in small white female ward building, replacing worn out wood floors.
- Repaired toilet and bathroom areas in colored male ward building No. 38.
- Constructed 1,133 lineal feet of small tunnels for steam lines.
- Renovated interior of white female patients' dining room, resurfacing floor, repainting, etc.
- Electric and plumbing work on the above listed projects was accomplished by forces of our engineering department.

In addition to the above, numerous small jobs that arise from day to day, such as replacing glass in windows and doors, patching floors, screen windows and screen doors, installing new locks and repairing old ones, have been accomplished.

Also operated within the scope of this department are:

- A saw mill, which produced 864,373 board feet of lumber from timber grown on hospital lands.
- Carpentry shops, engaged in the manufacture of such items as windows, doors, window and door frames, cabinets, wardrobe lockers, chairs of various types including office

type swivel chairs, tables and many other items of woodwork essential to the efficient operation of the hospital.

A shoe shop, where approximately 7,000 pairs of shoes were repaired for the patients.

Mop and broom shop, where 18,884 mops and 10,491 brooms were manufactured.

Sheet metal shop, where numerous cooking utensils and other metal items are manufactured and repaired and which handles sheet metal work necessary to the construction and repair of buildings.

A paint crew, consisting of ten regular painters and one foreman, to keep the many buildings well coated, both inside and outside. Many items of furniture and fixtures are also painted by this crew.

ENGINEERING DEPARTMENT

It is the responsibility of this department to operate and maintain plant utilities and distribution systems furnishing electricity, steam, water, ice and communications as well as general maintenance of refrigeration, automotive and all other mechanical equipment serving the hospital.

Plant records show the following production figures for the period: Electricity, 19,958,546 KWH, Steam, 991,147,450 lbs., Water, 1,566,724,400 gallons, Ice, 4,114 tons.

This department has installed electric, plumbing and heating systems in all new work and major renovation of existing buildings done by the hospital forces. Projects are listed under report of the construction department.

It was reported in the 1952-54 report plans were being prepared for improvement of utilities and plant expansion as provided in appropriation made by the 1953 Legislature. All this work was completed by contract during the past biennium and the principal items included a new 60 M pound per hour boiler and 2,000 KW turbo generator, rehabilitation of electric, water, and sewer systems, new fire alarm system, and replacement of air conditioning equipment in the operating room. Funds were provided by the last Legislature for the installation of an additional 250,000 gallon water storage tank and additions to our filter plant, and contracts have been let and work is in progress on these projects. When these projects are complete our utilities distribution systems, except communications, will be adequate to care for the needs of the institution for many years.

Our next greatest need is the condemnation of two turbo generators manufactured in 1920 and 1921, respectively, and two 500 HP B & W boilers manufactured in 1913 and installed second hand at this institution. These should be replaced with one new turbo generator and one new modern high pressure boiler, and with this replacement this institution's power plant could adequately meet the demands for the next twenty years.

FIRE DEPARTMENT

The report of our Fire Department shows losses totaling only \$242.54 during this biennium. Even with the growth of the institution, this is the lowest loss ever recorded for this length of time. This excellent record was made possible not only through the efficiency of our fire department in making immediate response to alarms, but also to the cooperation and alertness of all our employees in fire prevention practices.

In comparison with previous biennial periods, there has been material reduction in the number of bed fires. In fact, the only fire which may have posed any special hazard occurred in our mattress factory, causing loss of only \$125.00. This was a flash fire in the ginning room, resulting from spark, caused by small pebble or small piece of metal in ginning machinery, which ignited the cotton being processed.

During the period of this report the department replaced its small booster truck with a modern 500 GPM Pumper carrying a water tank of 500 gallons capacity and equipped with all modern conveniences. This is one of the most versatile pieces of fire fighting equipment in the area and has added greatly to the efficiency of the department.

Our fire alarm system was also completed during this period and we now have a total of 41 fire alarm boxes covering the entire institution, connected by underground cable, with the exception of a short distance of overhead wiring. These boxes are located both on the streets and inside the ward and hospital buildings.

Completed shortly after the beginning of this biennial period were ten aluminum fire escape tubes to provide extra facilities for evacuating some of our patient buildings. A quarter folding life net has also been acquired by the department.

Our response to woods fires has been greatly reduced this last year of the biennium because of the fact that the Florida Forest Service established a unit in Gadsden County and relieved us of this work to a great extent.

The fire department has carried on its usual fire prevention work during this period, consisting of building inspections, classes in prevention and extinguishment for employees and extinguisher recharging.

We have endeavored to maintain peak efficiency within the department by a continuous training program for both full time firemen and volunteers.

HORTICULTURE AND GROUND MAINTENANCE

This department is responsible for the care and beautification of our hospital grounds. The general work program consists mainly of mowing

lawns totaling many acres, tending shrubbery, trees and flowers, as well as certain ground improvements.

During this biennium 6,491 pounds of pecans were harvested from our trees.

In addition to regular ground maintenance and horticultural activities, this department has accomplished several new projects involving considerable landscape work around our new geriatrics building, new receiving and intensive treatment building, and new addition to our tuberculosis hospital. These projects necessitated the hauling and distribution of approximately 1,000 loads of soil, as well as grading, sodding and other beautification work.

GENERAL SANITATION

Operations of this department are under the supervision of a registered and licensed sanitarian and pest control operator. Responsibilities include pest control, operations of swill cooking plant, garbage disposal, operation of sewage treatment plant, and regular inspections of all dormitories, food departments, dairy and other installations.

Inspections are made monthly and inspected areas are graded in accordance with conditions found. Pest control operators service buildings, monthly for the control of roaches, water bugs, ants, mice and other vermin. Insecticides and rodenticides used in this program are compounded under direction of the sanitarian, resulting in large savings.

Our grounds are kept in good sanitary condition by work details who cover grounds daily, removing trash and cleaning streets and walks.

Our swill cooking plant, operating two 1,000-gallon steam pots, processes swill for our hog farm. This manner of processing more than meets the requirements of State and Federal Livestock requirements in this respect.

Despite the fact that new buildings placed in operation during the last few months of the biennium have placed an additional load on our sewage treatment facilities, our plant has continued to operate very efficiently and is turning out an effluent that is highly satisfactory.

LAUNDRY DEPARTMENT

As the population of the hospital has increased there has been a considerable increase in the number of pounds handled by the laundry. For the period under report we have handled in the laundry 13,320,000 pounds at a cost of \$.0210 per pound. For the previous biennium we handled 12,322,596 pounds at a cost of \$.0209 per pound.

The following equipment has been added during the biennium:

- 3 Ventilating Canopies
- 1 Flat-Work Ironer (small 3 roll)
- 1 Uniform Unit (consisting of 4 hot head pressers)
- 2 Washing Machines

Additional floor space has been completed and is now in use with the machinery mentioned above. This addition has given the laundry department much needed relief, and has brought about a more efficient output of its daily poundage.

FARMING OPERATIONS

Farm and Dairy production records of items produced for use of the hospital during this biennium show considerable increase in quantities over the previous biennium. Our portable irrigation system has been of great assistance toward increased production of vegetables, enabling us to maintain growth during dry periods and more adequately meet the needs of our food service departments.

Production from our hog farm is also up considerably in poundage over the previous biennium, however, market values on hogs have declined during this period. Approximately 95% of feed for our swine herd is swill from our kitchens. All swill is cooked before feeding, as required by State and Federal regulations. All our pigs are vaccinated as soon as they are weaned. There has been no evidence of vesicular exanthema in our herd.

Dairy records show good increase in milk production over the previous biennium. All milk is pasteurized before delivery to the hospital kitchens. Care of our dairy cattle includes vaccination of calves and periodic checks for disease of dairy cows.

In addition to general farming operations, the farm department has planted 125,000 pine seedlings, constructed new fire lanes, and assisted in repair of farm buildings.

Following is report showing items produced and their values:

FARM PRODUCTION—YEARS 1955 AND 1956

	Quantity	Amount	Total
Fresh Vegetables (for kitchen use) . . . lbs.	2,387,674	\$ 111,004.90	
Cantaloupes . . . lbs.	1,954	122.18	
Carrots . . . lbs.	80,000	800.00	
Pecans . . . lbs.	6,491	2,575.00	
Potatoes, Irish (new) . . . lbs.	149,797	6,918.19	
Potatoes, Sweet . . . lbs.	117,737	6,462.42	
Watermelons . . . only	5,586	1,313.25	
Corn . . . bu.	55,357	77,499.80	
Corn Meal . . . lbs.	239,655	10,784.57	
Cotton . . . lbs.	20,854	6,904.24	
Cottonseed . . . lbs.	14,356	382.59	
Ensilage . . . tons	680	5,440.00	
Grits . . . lbs.	50,923	2,291.54	
Hay, Crimson Clover . . . bales	283	127.35	
Oats . . . lbs.	98,017	4,118.90	
Oats, Straw . . . bales	708	141.60	
Rye, Florida Black Seed . . . lbs.	4,464	95.98	
Rutabagas . . . lbs.	275,000	2,750.00	
Seed . . . lbs.	37,447	1,482.63	
Cottonseed Meal (exchanged for Cottonseed) . . . sacks	82	246.00	\$ 241,461.14
	Acres	Amount	
PASTURAGE FOR HOGS AND CATTLE:			
Clover, Crimson . . .	78.89		
Oats . . .	580.00		
Oats and Pensacola Bahia . . .	105.50		
Coastal Bermuda . . .	47.70		
Pensacola Bahia . . .	239.00		
Bahia and Bermuda . . .	400.00		\$ 14,478.78
HOG FARM:	Head	Pounds	Amount
Hogs Sold . . .	2,619	615,935	\$ 96,921.44
	Head	Quantity	Amount
DAIRY:			
Milk Produced . . .		405,031 gals. 112,430 lbs.	\$ 218,281.94
Cows Sold . . .	109		10,037.98
Cows Sold (pure bred) . . .	1		350.00
Calves Sold . . .	210		490.50
Calves Sold (pure bred) . . .	3		63.00
Awards . . .			57.00
			\$ 229,280.42
BEEF HERD:			
Cattle Sold . . .	47	30,895 lbs.	\$ 3,485.10
Beef Issues . . .	1		50.00
		Quantity	Amount
CANNING PLANT:			
Beets, 4/10 . . . jars		8	\$ 3.44
Beets, 6/10 . . . jars		7,890	3,392.70
Beans, String, 6/10 . . . jars		2,520	1,260.00
Carrots, 6/10 . . . jars		6,875	2,956.25
Tomatoes, 6/10 . . . jars		4,896	2,692.80
			\$ 10,305.19
TOTAL PRODUCTION . . .			\$ 595,982.07

SEWING ROOM

PRODUCTION REPORT FOR BIENNIUM

	<i>Quantity</i>	<i>Amount</i>	<i>Total</i>
Clothing Manufactured:			
Dresses.....	25,062	\$ 49,933.50	
Chemise.....	20,300	25,375.00	
Gowns.....	12,706	22,248.25	
Other.....	21,667	29,110.60	\$ 126,667.35
Bed Linens Manufactured:			
Pillow Cases.....	12,298	\$ 7,502.50	
Sheets.....	4,190	7,090.25	\$ 14,592.75
Other Linens Manufactured:			
Towels.....	14,694	\$ 2,938.80	
Miscellaneous.....	2,408	4,921.65	\$ 7,860.45
			\$ 149,120.55

MATTRESS FACTORY

PRODUCTION REPORT FOR BIENNIUM

	<i>Quantity</i>	<i>Amount</i>	<i>Total</i>
Covers, Mattress.....	108	\$ 2,134.00	
Covers, Mattress, Rubberized.....	1,070	5,617.50	
Mattresses, 8-oz. Cotton.....	3,319	66,380.00	
Mattress, Rubberized.....	1,184	29,600.00	
Pillows, 8-oz. Cotton.....	3,070	6,140.00	
Pillows, Rubberized.....	294	735.00	
Pillow Cases.....	10,699	6,331.90	
Pillow Ticks, Rubberized.....	14	21.00	
Sheets, Bleached.....	10,176	19,198.00	
Towels.....	17,511	3,502.20	
Aprons, Rubberized.....	334	584.50	
Awnings.....	8	105.53	
Camisoles.....	320	960.00	
Cushions, Rubberized.....	200	228.26	
Tarpaulin.....	3	68.40	
Tents, Funeral.....	2	56.96	
Venetian Blinds.....	58	451.43	
Other.....	288	849.29	
Upholstering Furniture, Repairing Venetian Blinds, etc.....		1,430.98	\$ 144,394.95

**THE G. PIERCE WOOD
MEMORIAL HOSPITAL**

Arcadia, Florida



STAFF

As of June 30, 1956

W. D. Rogers, M.D.	Superintendent
Chattahoochee	
A. P. Holloman	Assistant Superintendent
F. E. Daves, M.D.	Medical Director
A. C. Herman, M.D.*	Psychiatrist
R. G. Kibbey, M.D.	Psychiatrist
F. J. Liddy, M.D.	Psychiatrist
A. D. Migliore, M.D.	Physician and Surgeon
H. E. Parker, M.D.	Physician and Surgeon
L. F. Verdel, M.D.	Psychiatrist
C. E. Beckham, D.D.S.	Dentist
Marshall T. Whiddon	Business Manager
E. C. Wey	Drug Clerk
Irma C. Janer	Laboratory Technician
Willie Mae Daves	X-Ray Technician
Elizabeth W. Mahone, R.N.	Chief Nurse
Dorr	
Verna L. Harden, R.N.	Chief Nurse
Carlstrom	
Kathryn Edwards, R.N.	Operating Room Supervisor
Reverend J. J. Martin	Chaplain
D. S. Shepard	Maintenance Engineer
Minnie Lee Cloud**	Supervisor of White Female Department
Dorr	
Alvie Spearman	Supervisor of White Female Department
Dorr	
Mary J. Hill, R.N.	Supervisor of White Female Department
Carlstrom	
O. E. Harden	Supervisor of White Male Department
Nell Bolling	Recreation Director
Dorr	
E. W. NeSmith	Recreation Director
Carlstrom	
Lessie Hansel	Occupational Therapist
Dorr	
J. W. Smith	Occupational Therapist
Carlstrom	
Walter R. Smith	Supervisor of Laundry
Richard D. Davis	Supply Clerk
T. M. Nash, Jr.***	Steward
J. A. Walters	Steward
Ellen W. Bond	Sewing Room Supervisor
Dorr	
Emma E. Shepard	Sewing Room Supervisor
Carlstrom	

* Resigned ** Retired *** Deceased



One of five new continued treatment buildings

HISTORY

The G. Pierce Wood Memorial Branch of the Florida State Hospital is located in DeSoto County, near Arcadia. It has two divisions—Dorr, located on State Highway No. 70, 13 miles East of Arcadia, and Carlstrom, located on State Highway No. 31—7 miles Southeast of Arcadia. The two divisions are some 12 miles apart. The land and original installations at these sites were formerly the property of the U.S. Government, and were used as Air Force Training Bases. These properties were acquired by the State of Florida in 1946 and conversion of buildings for use in the care and treatment of patients was completed in 1947. Total land area is 2,133 acres; 1,280 at Dorr and 853 acres at Carlstrom. Additions to facilities have been made from time to time. During the biennium covered by this report, a new ward building (60 beds) and an addition to the hospital (34 beds) were completed at Dorr. At Carlstrom, 4 ward buildings (400 beds for women), 1 ward building (100 beds for men), and an addition to the medical and surgical hospital were completed. A new sewage disposal plant was constructed as well as a major addition to the Water Plant. Three duplex apartments, nurses' home and men's dormitory were also completed for housing personnel. Construction of a new kitchen, dining room and cold storage facilities at the women's division at Carlstrom has been authorized and construction should be started within 90 days.

At the end of the first biennium covering this branch hospital (June 30, 1948) patients numbered 735. As of June 30, 1956, we have 1,548 patients and a capacity of 1,850. We are in the process of transferring patients from Chattahoochee to bring the patient load up to capacity.

MOVEMENT OF POPULATION

On July 1, 1954, the first day of the biennial period, the patient population was 1,228. During the biennium 1,065 patients were admitted to the institution, which resulted in a total of 2,293 patients treated during this period. The 1,065 patients admitted included all new admissions, returns from furlough, readmissions on former commitment, transfers from Chattahoochee, and returns from escape. Of the group of 1,065 patients, 374 were admitted during the first half and 691 during the last half of the biennium. The first admissions to the institution totaled 150 for the first half and 196 for the last half of the biennium, with a total of 346 first admissions for the biennium, an increase of 193 first admissions over that for the previous biennium. The hospital census through June 30, 1956, was 1,548, showing an increase of 320 in total in-patient population for this period.

Separations from the hospital for the biennium numbered 755, and this figure includes furloughs, deaths, escapes, transfers to V. A. Hospitals, transfers to Chattahoochee, and patients discharged as competent.

The period from July 1, 1954, to July 1, 1955, showed 216 patients released on furlough, and the period from July 1, 1955, to July 1, 1956, showed an increased number totaling 295 furloughed during that year. During the period of 1954-1956, 73 patients were discharged by virtue of having been absent one year on furlough; 42 patients were discharged from the institution as competent; 19 patients left the institution on escape, and 167 patients passed away during the period. During the biennium, 9 patients were transferred to Chattahoochee. One patient expired while on furlough. One patient discharged out of State, while on escape.

The majority of patients admitted were senile and arteriosclerotic patients who require an exceptional amount of nursing and medical attention.

MEDICAL STAFF ACTIVITY

At the end of the biennium, the Medical Staff consists of a Medical Director and five assistant physicians. During the period one physician resigned, one returned from military service and two were employed.

The Staff holds regular diagnostic conferences for the purpose of classifying each new admission and determining the type of treatment which might best benefit the patient. Staff Conferences are also held for considering the release of patients.

GENERAL HOSPITAL DIVISION

The general hospitals have available 56 beds for women patients and 24 beds for male patients. There are 12 beds for employees. Original admissions as well as the acutely ill are cared for in the general hospitals. Additional departments located in the general hospitals are emergency rooms, operating room, pharmacy, X-ray and laboratory.

HEALTH

We are pleased to report that there has been no outbreak of contagious or infectious diseases among our patients or employees during the biennium. An active medical program, which embodies thorough physical examination of employees as well as patients, has enabled us to maintain a high standard of physical health.

Other preventive measures include periodic tests of our water supplies and of milk we receive, as well as routine check-ups on all food handlers, made periodically. The number of patients in the aged and infirm type group is steadily increasing. These patients while not acutely ill, require much medication, constant nursing care and special diets. Many of them are not physically able to go to the dining hall for their meals and must be served in the wards.

CLINICAL LABORATORIES

Two clinical laboratories, one at each branch, are maintained under registered technicians.

Following is a list of tests performed.

Bacteriology	1,461
Serology	1,817
Chemistry	1,622
Hematology	8,321
Parasitology and Urinalysis	7,248
TOTAL	20,469

SURGERY

Nearly all major surgical procedures are carried out at the Carlstrom Branch. The surgical service includes emergency room service and central supply for all sterile supplies for the hospital. The service renders heliotherapy, anti-syphilitic treatments, immunizations. Employee physical examinations are conducted in the emergency room.

Operations performed:

Gynecological	3
General Abdominal	23
General Minor Operations	376
Blood Transfusions	87
Treatments given	24,184
Infra Red Treatments	285
Ultra Violet Treatments	196
Immunizations	2,383
Sterile Trays Prepared	11,968

SHOCK TREATMENT AND DRUG THERAPY

During the biennium 1,493 electric shock treatments have been given. Sub insulin shock is used frequently, especially in patients who present feeding problems. Most of these responded satisfactorily and are on this treatment a short while only.

We have administered all of the accepted tranquilizing drugs quite extensively during the past two years and the response to these drugs has been encouraging and the side effects minimal. A total of 1,186 patients have received this treatment.

X-RAY DEPARTMENT

Work load of the X-ray Department has increased during the past two years. Routine films are made on all new admissions and new employees. It has been the practice to X-ray all patients prior to their re-

ceiving shock therapy and also to run serial films on all cases suspected of having pulmonary tuberculosis. All food handlers are given routine rechecks every six months.

Film reading is in the hands of the Medical Staff. Patients requiring X-ray and radium therapy are referred to Cancer Clinics in the region.

Following is a report of work accomplished:

X-rays	3,301
Electrocardiograms	404
Basal Metabolism Readings	53

PHARMACY

The Pharmacy has maintained a complete stock of drugs and biologicals for the care of our patients. During the period 5,445 prescriptions were filled as well as 2,702 department requisitions.

DENTAL DEPARTMENT

Dental facilities consist of two chair units at Dorr and Carlstrom. One full-time dentist serves both of these clinics. The dentist is under the supervision of the Chief Dentist, Florida State Hospital, Chattahoochee. The resident dentist also serves the State Prison Farm at Belle Glade, spending two days of each two weeks there. We have been authorized to employ one additional dentist for the fiscal year beginning July 1, 1956. The total sittings for the biennial numbers 8,295.



Recreation Building

OCCUPATIONAL THERAPY

The Occupational Therapy Department consists of Art Shop at Dorr, and Art Shop at Carlstrom for women. For men at Carlstrom, there is a woodcraft shop, Art Shop, and a Garden Therapy program.

In the Dorr Art Shop, 50 patients are enrolled at all times. The patients do embroidery work, knitting, weaving and other types of handicraft work. Ceramics and basketry are also included.

In the Carlstrom Art Shop for women, 39 patients are enrolled. The type of work is similar to that at Dorr.

In the men's Woodcraft Shop and Art Shop at Carlstrom, 45 patients are assigned at this time.

At the end of the biennium, 377 patients were assigned to some form of occupational therapy.

RECREATIONAL THERAPY

The recreational program consists of movies twice a week, softball, pool, bingo, and other games. There is one dance each week. There are weekly shopping tours to Arcadia. Christmas and Easter talent programs are presented by the patients. All patients able to do so take part in some form of recreational therapy and participation in the various programs totals around 8,000 per month. Books and magazines are available in our libraries and distribution is made from the libraries to the several patient departments.

CHAPLAINCY

Protestant religious services are conducted each Sunday afternoon by the Hospital chaplain, and are well attended. Music is furnished by the patients. The Chaplain visits the acutely ill on Sundays and Wednesdays, and on Wednesday, visits all wards. The Chaplain holds interviews with individuals and gives them such aid and comfort as he may in their spiritual and personal problems. These personal contacts are of real benefit to the contentment and general welfare of the patients and the kind interest and understanding of the Chaplain is appreciated by everyone.

Special denominational services are held from time to time as arranged by the denominational groups.

Ladies of three local churches visit the hospital once each during the month for devotional services.

MOVEMENT OF POPULATION

Population as of July 1, 1954:

In Hospital	1,228
Absent on Furlough	47
TOTAL	1,275

Admissions:

New Commitments	346
Former Commitments	7
Return from Furlough	370
Return from Escape	18
Transfers from FSH No. 1	333
Discharge Cancelled	1

Total All Admissions 1,075

Separations:

Furloughs	511
Discharge while on furlough	(73)
Discharges—all other	42
Escapes	19
Deaths	167
Transfers to FSH No. I	9
Transfers to V. A. Hospitals	7

TOTAL all separations 755

NET POPULATION GAIN 320

Population as of June 30, 1956:

In Hospital	1,548
Absent on Furlough	111

TOTAL 1,659

FOOD SERVICE

During the biennium, an average of 4,312 meals per day were served to patients and employees. This is an increase of 824 meals per day over the 1952-54 period. Meals are appetizing, well balanced and nutritious. Cafeteria type service is used in the dining rooms and food served on the wards is delivered in electric food conveyors.

A physician is assigned to the kitchens and dining rooms for inspection of food as to quality and quantity as well as the sanitary conditions of the services.

MAINTENANCE DEPARTMENT

In addition to the maintenance of buildings, equipment and grounds, this department has accomplished the following:

Built chlorinator room on Water Plant at Dorr. This room was of concrete block and is approximately 8' x 10'.

Remodeled White Female Ward for senile patients. (Dorr.)

Built extension on Maintenance Garage. This room was constructed of galvanized metal and is 12' x 30'6".

Remodeled room at Carlstrom Infirmary to create two semi-private rooms for critically ill patients.

Built walk-way cover approximately 1,000' long x 8' wide for White Female Wards (Dorr). This walk was covered with asbestos shingles.

Replaced all wooden "cat walks" with metal at the Dorr Water Plant. This will

be a saving in material and labor, as the wooden walks and stairs were constantly having to be repaired.

Poured concrete sidewalks at eight Duplex Apartments for Staff at Carlstrom and Dorr. These sidewalks were poured from the buildings to the streets and driveways.

Built two waste lime drying beds for the new Water Plant at Carlstrom. Each of these drying beds were built of concrete block with tile drains and are 25' x 60'.

Built Chemical Storage Building for new Water Plant at Carlstrom. This building is of concrete block and is approximately 18' x 14'.

Built laboratory at new Sewage Disposal Plant at Carlstrom. This laboratory is approximately 10' x 14' and is of concrete block construction.

Built a dirty linen storage room on two White Male Wards. Each of these rooms is 9' x 9' and built of concrete block.

Built an additional room on Staff Residence No. D-35. This room is approximately 16' x 12' and is of wooden construction.

Installed new type presses and equipment at Laundry.

In addition to the preceding, we have maintained the following:

An ice plant which has an average monthly output of 70,000 pounds of ice. This ice is stored and used at both Carlstrom and Dorr.

A garage which has serviced and kept in operation 15 vehicles, besides doing numerous jobs of welding and metal work.

A paint shop at each Hospital which is equipped for spraying equipment and furniture. Also, all of our signs are painted here.

This department also handles the disposal of all refuse which is disposed of by the land-fill method. Also, all hospital buildings are serviced at regular intervals for control of insects and rodents.

FIRE DEPARTMENT

Our Fire Department consists of a fire marshal and 12 volunteer firemen, who are regularly employed in other departments of the hospital. This department has regular drills and instructs other personnel of the hospital in the use of the fire fighting equipment which each building has available.

During this biennium the Fire Department has maintained all first aid fire equipment throughout the hospital buildings. Fire extinguishers are placed in all buildings and recharged and tested regularly. Fire hose is readily available and all personnel are shown how to use it, so as to be able to aid the volunteer firemen.

Fires and valuation of losses were as follows:

<i>Type of fire</i>	<i>Number</i>	<i>Losses</i>
Buildings and contents	2	\$ 9,998.50
Laundry dryer	1	194.69
Automotive fires	1	250.00
	—	—
TOTAL	4	\$10,443.19

WATER AND SEWAGE DEPARTMENT

During the biennium we have added to the Water and Sewage Departments. At Carlstrom, we have added a new water plant to replace the old plant, which was not sufficient for our use. The new treatment plant is treating 200,000 gallons per day and it will produce 200 gallons per minute. At Dorr, the water plant is treating 100,000 gallons per day and will produce 200 gallons per minute. Our water treatment plants at Dorr and Carlstrom produce an average of around 8,000,000 gallons of water per month.

We have added a new trickling filter sewage plant at Carlstrom during this biennium. The new plant will treat 150,000 gallons of sewage per day. This plant is in addition to the activated sludge plant that we already had. The activated sludge plant will also treat 150,000 gallons of sewage per day. The sewage treatment capacity at Carlstrom is 300,000 gallons per day. At Dorr we have an activated sludge treatment plant with a capacity of 150,000 gallons per day.

Our laboratory is equipped so that all necessary tests can be made and treatment can be kept at its best. Samples are also sent regularly to the State Board of Health for analysis.

LAUNDRY

During the period covered by this report, the laundry has operated efficiently at full capacity. The Laundry processed 3,176,546 pounds of laundry during the biennium.

Additional equipment installed:

- 4 tumblers 30" x 30"
- 1 washer 42" x 84"
- 6 air presses
- 1 6-roll flat work ironer

PASTURE LANDS

Acreage not included in the hospital area is being used as pasturage for State owned beef cattle. Some 320 acres have been improved. We have a total of 427 head of beef cattle.

In the hog project, we have 75 brood sows and 350 pigs. Hospital swill is utilized to feed these hogs.

SEWING ROOMS

Four employees are assigned to the two Sewing Rooms. The Sewing Rooms manufactured and repaired 15,609 items during the biennium. This is an increase of 3,556 items over the 1952-54 period.

BARBER SHOP

Three barbers are employed in the Shop. 18,514 haircuts were given and 89,503 shaves.

BEAUTY SHOP

The Beauty Shop at Dorr is operated by a registered beautician. We are in the process of establishing another beauty shop in the new women's division at Carlstrom. Until this is done, the Operator at Dorr is servicing both divisions.

Following is a list of the work done during the biennium:

Manicures	27
Shampoos and sets	380
Scalp Treatments	588
Hair Cuts	2,993
Permanents	261
Hair Conditioners	35
Tints	3
Arches	20

FLORIDA STATE HOSPITALS

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